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## ABSTRACT

This manual provides the procedures and instrumentation through which vocational education program personnel may critically assess the value and effectiveness of their program. The first section addresses preparing for the self-evaluation, including commitment, committees, and timetable. Conducting the self-evaluation is the focus of the next section. Use of questionnaire/forms provided in this section and in the appendix is considered. Also discussed are school district profile, vocational program profile, data display in working table format, data analyses, and conclusions, which are chapters 1-5 of the Self Evaluation Report. Guidelines for conducting a followup survey and instructions for the Self Evaluation Report follow. A final section concerns preparation for the visiting team and on-site visitation, which is the second step of the program evaluation. Appendixes, amounting to approximately three-fourths of the manual, include these forms: (1) working table shells for graduate followup survey, employer followup surveys, student forms, vocational staff form, advisory committee opinionnaire, and services to special needs students; (2) publication table shells; and (3) sample forms for on-site visit. (YLB)

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WISCONSIN DEPARTMENT of PUBLIC INSTRUCTION

Bureau of Vocational and Career Education

# SELF EVALUATION MANUAL

for

## WISCONSIN SECONDARY VOCATIONAL PROGRAMS

Revised July, 1980

Center for Vocational, Technical and Adult Education

U.S. DEPARTMENT OF HEALTH,  
EDUCATION & WELFARE  
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SELF EVALUATION MANUAL

Project Number O-5189/E/084

Wisconsin Department of Public Instruction  
Bureau of Vocational and Career Education  
Madison, Wisconsin

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## PREFACE

The purpose of this Self Evaluation Manual is to provide the procedures and instrumentation through which Vocational Education program personnel may critically assess the value and effectiveness of their program.

Although there are many factors which contribute to a successful self evaluation, essentially there are three basic commitments required of those who wish to ensure a quality self evaluation:

- willingness to invest the time, effort and expense required to carry it through,
- support of administrative and program personnel for the purposes of the study, and
- a conscientious dedication to carry out, to the greatest possible extent, any improvements which the study shows to be needed for strengthening the program's structure and services.

This Manual was developed as a part of the Pilot Secondary Vocational Program Evaluation Project. It has been revised following each of two pilot years. It is subject to revision in the future.

The Self Evaluation Model is based upon statewide goals and objectives of vocational education as determined by the project Advisory Committee and project staff. Advisory Committee members included: Ernest Haucke, Jerry Henning, Bill Ihlenfeldt, Terry Largent, Al Pitts, Roger Prickette, Al Rayford, Jerald Schoenike, Paul Speight, Thomas Stefonek, Andy Suess, and Jerry E. Weiser. It is meant to be used in conjunction with and as the first step prior to the on-site Team Visitation so that a comprehensive internal and external evaluation may result. (See Team Visitation Guidelines)

Recognition for foresight and continual support and assistance throughout the project is given to the Bureau of Vocational and Career Education, Wisconsin Department of Public Instruction. The administration, LVECs and vocational staff of the pilot schools are also commended for having responded with wholehearted professional dedication and participation in the field test of the evaluation model, doing so under rigorous time constraints.

My thanks to all others who have helped in the development and conduct of this project.

Dorothy Dale, Project Director  
Center for Vocational, Technical  
and Adult Education  
University of Wisconsin—Stout

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## INTRODUCTION

In an attempt to be accountable for the distribution of vocational funds as well as to promote optimum planning and improvement of local programs, the Wisconsin Department of Public Instruction (DPI) in 1976 initiated and sponsored the development of an evaluation system for secondary vocational education programs.

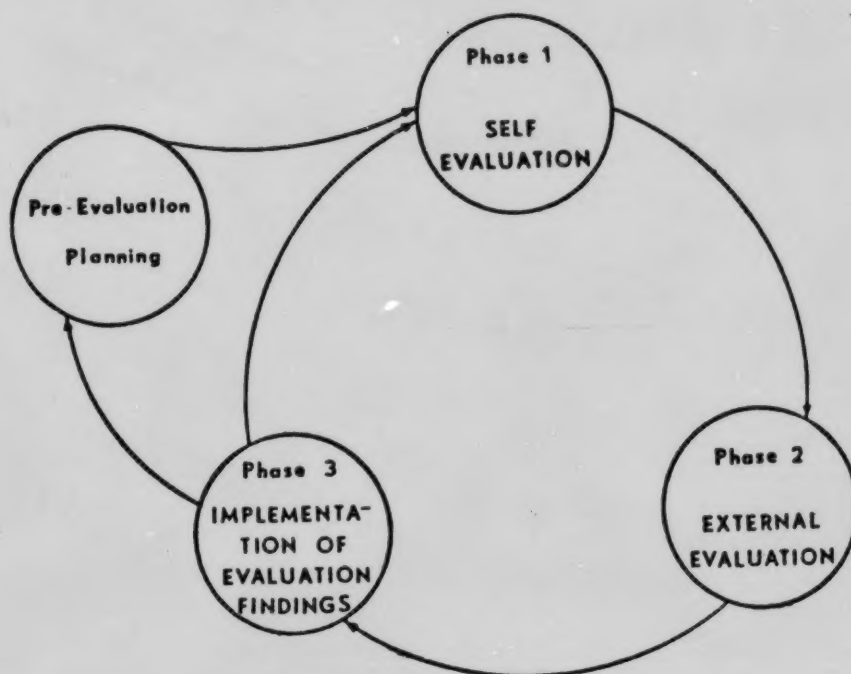
The pilot Secondary Vocational Program Evaluation Project was a cooperative effort of state and local personnel coordinated by the Center for Vocational, Technical and Adult Education (CVTAE), University of Wisconsin-Stout. Initial development was accomplished at a four-day workshop attended by project advisory committee members and CVTAE project personnel. At the workshop a Program Development Evaluation System model was developed depicting program activities as NEEDS ASSESSMENT, PLANNING and GOAL SETTING, IMPLEMENTATION, PRODUCT, and EVALUATION. Key questions were generated within each program phase indicating key evaluation concerns. The instrumentation and procedures of both the Self Evaluation Manual and Team Visitation Guidelines are based upon these identified program evaluation concerns.

The Vocational Program Evaluation System consists of three interrelated phases as illustrated in Figure 1.

Figure 1

### OVERVIEW

#### SECONDARY VOCATIONAL PROGRAM THREE-PHASE EVALUATION SYSTEM



Each of the three phases has a specific function defining the objectives of the program evaluation.

Self Evaluation. Adapting and using the procedures and instrumentation contained in the Self Evaluation Manual, plan, conduct, and report a comprehensive self evaluation of the total vocational program.

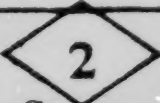
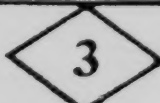
External Evaluation. Adapting and using the procedures and instrumentation contained in the Team Visitation Guidelines, conduct an external evaluation and receive a written report containing conclusions, recommendations, and suggested solutions for program improvement.

Implementation of Evaluation Findings. Using findings from the self evaluation and on-site team evaluation reports, develop short and long-range plans for improvement of the program. Begin implementation of the planned program of improvement.

Major outcome measures of the vocational program evaluation are prioritized on three levels as illustrated in Figure 2.

Figure 2

## Wisconsin Secondary Vocational Program Evaluation System

| THREE MAJOR PRIORITIZED GOALS                                                                                                      |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <br><b>1</b><br><b>Local</b><br><b>LEVEL</b>    | ... to promote and assist in the evaluation of secondary vocational programs for the purpose of program improvement at the local level.                                                                            |
| <br><b>2</b><br><b>State</b><br><b>LEVEL</b>    | ...to provide the Department of Public Instruction with valid and representative data upon which statewide planning of vocational education programs can be based.                                                 |
| <br><b>3</b><br><b>National</b><br><b>LEVEL</b> | ...to help ensure accountability of federal and state funds allotted to local secondary vocational programs and to satisfy federal legislation and state requirements of program evaluation within a 5-year cycle. |

## PREPARING FOR THE SELF EVALUATION

### Commitment

The self evaluation is a cooperative study and should involve a commitment and support from the school and program administration and involvement of all program personnel. The community, advisory committee(s), Board of Education, graduates and students should be cognizant of the development and informed throughout.

Adequate time should be allowed to provide for effective planning and completion of all phases of the study. A one-year time span is looked upon as minimum with major committee assignments being made prior to the evaluation year. An 18-month time span is suggested for large and/or multiple school evaluations.

### Committees

(1) Steering Committee. In order that the self evaluation study be effective and cohesive, it is necessary that overall responsibility for the study be vested in the head of the program - the Local Vocational Education Coordinator (LVEC). The LVEC will appoint a steering committee of which he/she should serve as chairperson. A representative steering committee would include: LVEC, Principal, Guidance Director, Coordinating Teacher(s), Public Relations Specialist, Academic representation, student/graduate representation, Advisory Committee Member(s).

With the steering committee, the LVEC charts the overall course of the self evaluation making any adaptations deemed necessary, appoints working committees to conduct parts of the study as deemed necessary, orients participants and other members of the institutional community to the self evaluation, outlines a time schedule, and sees to it that committees have necessary materials with which to work.

(2) Self Evaluation Activities. The instrumentation and procedures developed for self evaluation of the vocational program are designed to involve and/or gather data from all persons involved with or benefiting from the program. This is in keeping with the idea of self evaluation wherein the people most directly concerned with the various phases and facets of the program be involved with the portions of the self evaluation pertaining to their work or roles.

Eight evaluation activities were selected to elicit data from program personnel (administrative, supportive, instructional and special needs), students, employers, and advisory persons.

The evaluation activities and corresponding questionnaire form letters are displayed in the box on the following page.

| <u>Form</u> | <u>Activities</u>                                                                                                                                                                                                                                                                             |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A.          | Self Evaluation Narrative                                                                                                                                                                                                                                                                     |
| B.          | Student Followup Surveys <ol style="list-style-type: none"> <li>1. One-year Followup of Capstone graduates</li> <li>2. Three-year Followup of Capstone graduates</li> <li>3. One-year Followup of non-Capstone graduates</li> <li>4. Three-year Followup of non-Capstone graduates</li> </ol> |
| C.          | Employer Followup Survey                                                                                                                                                                                                                                                                      |
| D.          | Student (in-school) Assessment <ol style="list-style-type: none"> <li>1. Vocational Student Survey</li> <li>2. Student Interest Survey</li> </ol>                                                                                                                                             |
| E.          | Professional Staff Assessment                                                                                                                                                                                                                                                                 |
| F.          | Advisory Committee(s) Assessment                                                                                                                                                                                                                                                              |
| G.          | School and Community Data Collection                                                                                                                                                                                                                                                          |
| H.          | Vocational Services to Special Needs Students <ol style="list-style-type: none"> <li>1. Display Grid of Services</li> <li>2. Vocational Staff Rating Form</li> </ol>                                                                                                                          |

Questionnaire forms A through H for each activity are included in a packet separate from this Manual. Questionnaires were purposefully kept brief, easy to answer, and to-the-point. All forms and required data processing are furnished to participating schools by the CVTAE.

(3) Self Evaluation Committees. Pilot schools found various committee assignments effective. Following are workable suggestions:

- Self Evaluation Narrative - three to four members with LVEC as chairperson.
- Student Followup Surveys - two to three members.
- Employer Followup Surveys - two members.
- Student (in-school) Assessment - two members.
- Professional Staff Assessment - one member.
- Advisory Staff Assessment - two members.
- School and Community Data Collection - two members.
- Assessment of Services to Special Needs Students - two to three members. (Coordinate this activity with Form E, Professional Staff Assessment.)

### Timetable

Early in the study, a time schedule which reflects the following basic deadlines and elements should be established by the Steering Committee. Each participant should be given a copy of the schedule.

- Steering Committee establishes guidelines and tentative plan of operation. Formulate the first of the series of news releases for school and community awareness.
- Orientation time period for all program personnel to become familiar with the purpose, procedure, instrumentation and their role in the self evaluation. Issue Self Evaluation Manuals; organize self evaluation committees, publish and distribute lists of committees.
- The beginning date of the evaluation. Begin followup activities as early as possible. (See Guidelines for conducting the followup, p.14.)
- Get out news release.
- Deadlines for questionnaire response: professional staff, students (in-school), advisory committee members, employer and graduate followup. (A 6 to 8 week period is suggested as minimum for mailed questionnaire response, 3 to 6 weeks for telephone survey.)
- Data processing period. (Allow a minimum of 2 weeks, depending upon feedback from processing center.)
- Deadline for School District, Program and Occupational Area Profiles. This represents Chapters 1 and 2 of the Self Evaluation Report and can be compiled any time prior to or during the evaluation. Much of the content of these profiles is already in existence within the school and needs mainly to be organized and brought up-to-date.
- Final date for completion of Self Evaluation Report. (Allow at least 6 weeks to analyze data and develop tables for Chapters 3 and 4 of the Self Evaluation Report.)
- Deadline for duplicating Report and mailing one copy to the on-site team leader and each team member. The report must be completed so that team members have at least ten days for study of the Report prior to the On-Site evaluation date. The Self Evaluation Report should also be disseminated to appropriate school and program personnel.
- On-Site Team Visitation dates. Plan for a two-day team evaluation allowing for the team to arrive early in the evening before orientation. (See Appendix I for sample schedule, p. 85.) This time span applies to both the full on-site visitation and the mini on-site visitation.
- Publication date of the Team Report. (Allow 3 to 4 weeks for school personnel to type the final master of the Team Report from the rough draft typed copy edited by the CVTAE consultant at the conclusion of the on-site visitation. Allow another 2 to three weeks for duplicating and binding. This entire final activity is completed at the school.)

- Dissemination date of the Visiting Team Report to appropriate school and program staff, Board of Education, DPI and CVTAE contact persons.
- Beginning date of planning period to utilize findings of the Self Evaluation and Team Evaluation towards short- and long-range plans for program improvement.

Two alternative program evaluation time frames are presented below to assist LVECs in their evaluation timetable planning.

| General Activities                                  | Time Frame  |             |
|-----------------------------------------------------|-------------|-------------|
|                                                     | 1 Year      | 1½ Years    |
| ● Appoint Steering Committee . . . . .              | May         | May         |
| ● Begin Self Evaluation . . . . .                   | September   | September   |
| ● Conclude Self Evaluation and publish Report . . . | Feb./March  | June        |
| ● Conduct External Evaluation . . . . .             | March/April | Oct/Nov/Dec |
| ● Publish Visiting Team Report . . . . .            | May         | December    |
| ● Begin Program improvement planning period . . . . | June        | December    |

Time Frame Suggestions based on pilot school participation:

- One-Year Timetable. It is recommended that small schools and medium sized schools with limited vocational programs select this general time frame. There is no advantage in dragging out an evaluation which pilot schools demonstrated can feasibly be done in one year.
- 1½ Year Timetable. It is recommended that medium and large schools with comprehensive vocational programs as well as multiple school units select this general time frame. Eighteen months will provide the additional time needed to communicate with large numbers of participants, to reach large numbers of students and graduates, to report and portray a wide range of data, and to digest and analyze program strengths and weaknesses.

## CONDUCTING THE SELF EVALUATION

### Suggested Use of Questionnaires/Forms

- A. SELF EVALUATION NARRATIVE. It is suggested that Form A, Self Evaluation Narrative, be completed by the LVEC as Program Manager. Purpose and instructions are contained on the form. Please read and follow the instructions carefully. Also, an example of Form A follows in this chapter, p. 10. This narrative will be extremely useful to on-site team members.
  
- B. STUDENT FOLLOWUP. Four followup forms (B1, B2, B3, and B4) were designed to contact both Capstone and non-Capstone graduates, graduating at one- and three-year time periods. (Example: in the 1977-78 school year, graduates of 1977 and 1975 were contacted.) Guidelines for conducting an effective followup survey are contained in this Chapter, page 14. It is suggested that all one- and three-year Capstone graduates be contacted while in large programs a random sample of one- and three-year non-Capstone graduates be contacted. Non-Capstone graduates can be defined as: (1) graduates who were students in the vocational program but who did not participate in the final Capstone course and/or (2) graduates from general (academic) programs. The steering committee will want to decide which non-Capstone population(s) will provide the most useful data comparison with Capstone graduates and sample accordingly. *Surveying graduates from general education (academic) programs is optional.*
  
- C. EMPLOYER FOLLOWUP. It is recommended that graduates be allowed to give permission for the school to contact their employer and only those employers so identified be contacted with Form C. Employer name and address will be furnished by the graduate on the appropriate Form B and can be copied from the returned form. Note that provision has been made on the B forms for contacting employers of both Capstone and non-Capstone graduates.
  
- D. STUDENT (in-school) ASSESSMENT. Form D1 was developed to be used by in-school students. It is recommended that all 12th grade vocational sequence as well as Capstone students fill out the form as well as any other grades determined beneficial. A brief review of Form D1 will help you in determining from which other grades you wish to elicit this data.

Form D2 was developed to assess and compare the career interest and career exploration of students from college, general, and vocational programs. Pilot schools found this form to provide useful data when given to all students at the grade 10 level. *Surveying students with Form D2 is optional.*

- E. PROFESSIONAL STAFF ASSESSMENT. Form E was developed to obtain reaction on key question issues from vocational administrative, instructional, and counseling staff. It is recommended that all such staff be given the opportunity to respond to this form.

- F. ADVISORY COMMITTEE OPINIONNAIRE. Form F was designed to elicit data from advisory persons. Assessment of their feelings of contribution to their advisory committee as well as its effectiveness was developed. It is recommended that all committees advising Capstone programs be surveyed by contacting all members. If this is not feasible, a random sample of all members or the chairperson of each such committee may be surveyed.
- G. SCHOOL AND COMMUNITY DATA. Form G is a collection of facts and statistics designed to make the job of the visiting team easier. Team members will need Form G along with other materials in the Self Evaluation Report for advance study. Carefully follow the directions on the form completing all items.
- H. SERVICES TO SPECIAL NEEDS STUDENTS. Forms H1 and H2 are designed to portray current methods used in the identification of the needs of and the services to special needs students within the secondary vocational program. Complete directions are on the form. *All schools complete Forms H1 and H2 regardless of the number of special needs students involved.* (Form H2 can be coordinated with Form E.)

Response instructions are contained on each questionnaire form. Committees responsible for the distribution and collection of the various questionnaires will want to carefully record dates, sample procedures, number of forms distributed and number of forms collected from each group contacted. The section, "Guidelines for Conducting a Followup Survey," page 14, should be helpful to the committee(s) responsible for this part of the evaluation.

#### School District Profile (Chapter One of the Self Evaluation Report)

The Profile of the School District may be compiled by the Steering Committee or by an ad hoc sub-committee. In most instances, much of this material is already in existence within the District and needs only to be brought together into a cohesive narrative.

Introduce the reader to the school and community. Briefly, lay out a history of the District's development. What geographic area is served? Demographic information such as the following needs to be included: nature of the population; occupational profile; income profile; education profile; industrial profile. A map of the District can be included here or in team members mailed materials.

Include important aspects of the school's organization such as: District philosophy, goals and objectives; administrative organizational charts with names; the guidance function.

Summary tables, charts and figures can be of help to the reader. Feel free to include additional descriptions which will draw together into a profile that will be unique to the District. Avoid at all costs excessive verbiage, repetition, and extraneous materials.

### Vocational Program Profile (Chapter Two of the Self Evaluation Report)

The Steering Committee will designate the persons who will compile the Profile of the Vocational Program. The writers will need to include aspects of the program such as: (1) brief history of development; (2) philosophy and objectives of the total program; (3) organizational charts with names of department heads and instructors; (4) comprehensiveness of the program with regards to the Career Development Process; (5) variety of Capstone courses; (6) Exploratory and Sequence Courses.

The major part of the Program Profile will present a description for each Occupational Area. This is essential for the upcoming Team Visitation. Because the team member assigned to each occupational area will want to study in advance, please include each of the following for each discipline:

- (1) Goals and objectives,
- (2) Advisory committee composition including names and meeting schedule,
- (3) Capstone, sequence and exploratory courses, (scope and sequence outline)
- (4) Course outlines - include competency listings if used.\*

### Data Display in "Working Table" Format (Chapter 3 of the Self Evaluation Report)

The instrumentation and procedures used for self evaluation of a secondary vocational program were designed to gather data from all persons involved with or benefiting from the program. In order to translate the data collected from Forms A through H in a complete and understanding manner, table shells should be prepared on two levels: (1) the "working" tables which contain complete coverage of data collected and which form Chapter 3 of the Self Evaluation Report; and (2) the "publication" or "analysis" tables which are derived from the working tables and arranged to focus attention on important comparisons and relationships. (The publication tables will form Chapter 4 of the Self Evaluation Report.)

Chapter 3 of the Self Evaluation Report presents a complete report of all data in working table format. To assist schools in presenting this data in tabular form, empty table shells have been prepared for each questionnaire and can be used as presented or can be adapted for use. Also included for each questionnaire is the appropriate computer analysis requirement.

A small narrative to introduce the purpose and content of Chapter 3 is appropriate. Follow with completed table shells for each of the following forms used by the school.

\*Some of this material, because of length and/or bulk, may instead be included with exhibits displayed for team viewing in the team work room.

- Form A. Self Evaluation Narrative. Form A need not be reported in tabular form nor is it processed by computer. Form A is reported in narrative format following exactly the outline given on the form. A small sample illustrating response to Section II Goals/Planning is shown in the box below. Note that school response is best displayed in italics. Include Form A as the first component of Chapter 3 of the Self Evaluation Report.

Example of Form A

Section II. Goals/Planning

1. Describe in a few sentences the major philosophy of the school and the Vocational Education program. Where is it written? How is it made available to the community?

*See Chapters 1 and 2 of this report, pp. 3 and 9.*

2. List Vocational Education program goals and objectives if not included in 1. above.

*See Chapter 2 of this report, pp. 9-10. Also, we are making a concerted effort to revamp our curriculum so that all departments will respond to a similar format. Hopefully this will be available for the visiting team as an exhibit and at each department station.*

- Form B1. One-Year Followup of Capstone Graduates. A computer summary will be run for total responses and each occupational area showing number and percent response to each item as well as mean and standard deviation for Likert items. The table shell shown in Appendix A can be used to transcribe all data including "omits."
- Form B2. Three-Year Followup of Capstone Graduates. A computer summary will be run for total respondents and each occupational area showing number and percent response to each item as well as mean and standard deviation for Likert items. The appropriate table shell in Appendix A can be used to transcribe all data including "omits."
- Form B3. One-Year Graduate Followup Survey. A computer summary will be run for total respondents, for sequence vocational, and for general (academic) graduates, if surveyed. Number and percent response to each item will be shown as well as mean and standard deviation for Likert items. The appropriate table shell in Appendix A can be used to transcribe data including "omits."
- Form B4. Three-Year Graduate Followup Survey. A computer summary will be run for total respondents, for sequence vocational, and for general (academic) graduates, if surveyed. Number and percent response to each item will be shown as well as mean and standard deviation for Likert items. The appropriate table shell in Appendix A can be used to transcribe data including "omits."

• Form C. Employer Followup Survey. Computer summaries will be run for:

- (1) Total responses;
- (2) Capstone Graduates
  - a) Capstone - related
  - b) Capstone - non-related
- (3) Sequence - Vocational (Non-Capstone); and,
- (4) Academic (if surveyed).

The above summaries can be run only if coded appropriately on the form itself, in the box on the upper right hand corner.

Summaries will show number and percent response to each item as well as mean and standard deviation for Likert items. The appropriate table shell in Appendix B can be used to transcribe data from total respondents. Working table shells for Likert items other than total respondents will need to be adapted for use.

• Form D1. Student (In-School) Form. Computer summaries will be run for:

- (1) Total respondents; and
- (2) Responses by program (Ag., Business ed., Home Ec., etc.)

Summaries will show number and percent response to each item. The appropriate table shell in Appendix C can be used to transcribe data.

• Form D2. Student Interest Survey. Use of this form is at local school option. Computer summaries will be run for:

- (1) Total respondents: male, female; and
- (2) Response by course preparation.

Summaries will show number and percent response to each item. The appropriate table shells in Appendix C can be used to transcribe data.

• Form E. Professional Staff Form. A computer summary will be run for total responses only.

• Form F. Advisory Committee Opinionnaire. A computer summary will be run for total responses showing mean and standard deviation for each item. The appropriate table shell in Appendix E can be used to transcribe data. In large schools, computer summaries may be run if requested for each occupational area.

- Form G. School and Community Data. Form G is a collection of facts and statistics designed to make the job of the visiting team easier by presenting data for study prior to their arrival at the school for the on-site visitation. This form can be filled in (*italics is desirable*) as instructed on the form. Form G is not processed by computer. Be sure to include Form G in proper alphabetical order in Chapter 3 of the Self Evaluation Report.
- Forms H1 and H2. Services to Special Needs Students. Form H1 (white) contains overall instructions, activities, and a matrix for displaying methods/services currently offered to special needs students. Complete and fill out one master copy for Chapter 3 of the Self Evaluation Report as accurately and comprehensively as possible. Form H2 (yellow) is the Vocational Staff Rating Form to be used as indicated in the instructions. A computer summary for H2 will be run on total responses showing mean and standard deviation for each item. The appropriate table shell in Appendix F can be used to transcribe data.

#### Data Analyses (Chapter 4 of the Self Evaluation Report)

In order to present the data contained in Chapter 3 of the Self Evaluation Report in a format which will focus attention on important comparisons and relationships as determined by the program staff, the following procedure is suggested:

- (1) Analyze working tables which present full summation of items classified according to the original categories;
- (2) Scrutinize this original data for significant relationships and comparisons;
- (3) Transfer the "selected" data to publication tables, graphic reports, and/or narrative summaries in a simple and meaningful manner.

In order to assist LVECs in accomplishing the above three-step procedure, table shells showing a sample of meaningful comparisons drawn from the pilot test, are illustrated in Appendix G. These table shells can be used as presented or they can be adapted for use. In any event, these publication table shells should be considered a sample only except for p. 69, Number and Percent of Questionnaires Returned By Graduates, and p. 70 Number and Percent of Questionnaires Returned By Employers - these tables must be used. Each vocational staff will find an abundance of additional significant analyses which they will want to report in a similar fashion. Remember that publication tables are almost always accompanied by a narrative summary and, where applicable, the rating key should be shown on the table.

#### Conclusions (Chapter 5 of the Self Evaluation Report)

As a result of completing Chapters 3 and 4 and in preparation for the upcoming team visit, the LVEC/steering committee will have accumulated, through data analyses, a summation of the strengths and weaknesses of the vocational program.

A report of this self analysis, whether in the form of "conclusions and recommendations" or "strengths and weaknesses," can be beneficial both to visitation team members during the on-site investigation and to program personnel planning for program improvement. Therefore, districts are challenged to analyze the data and develop a written self analysis if Chapter 5 which will be a unique critique of the vocational program.

## GUIDELINES FOR CONDUCTING A FOLLOWUP SURVEY

- 
- DPI FOLLOWUP** ● *LVECs will follow instructions as written in the "Guidelines and Procedures, Secondary Vocational Education Followup Study, A. Completer/Leaver, B. Employer," from the DPI/BVACE, to complete state requirements.*
- 
- PREPARATION**
- Designate a Followup Coordinator assigned the responsibility for coordination and conducting each evaluation activity.
  - When time allows, develop and administer a "required" exit form to be completed by students just prior to graduation. It should include (1) an orientation and an appeal for cooperation in the forthcoming followup study and (2) a followup address at which or through which the graduate can be reached for initial followup. (NOTE: This activity can be done in May for the one-year student followup conducted the following year.)
  - Determine the survey population. In most cases this will include the one- and three-year graduates. (In the 1977-78 school year, graduates of 1977 and 1975 were contacted.)
  - Compile names and addresses.
- 
- DATA COLLECTION**
- Determine whether a telephone or mailed procedure will be used for the various forms.
  - Order the required number of survey instruments. (Include number required for followup of non-respondents.)
- For Mailed Survey
- Reproduce the required number of cover letters on school stationary.
  - Run mailing labels. Five labels for each name will provide two for the initial mailing, two for the followup of non-responders, and one for the master mailing list.
  - Fill in the B Form with occupational area of student. Be sure student's name is on each form for identification. Mail initial survey form and letter. Enclose a stamped, self-addressed return envelope.
  - Set up recording procedure.
  - Establish encoding procedure.
  - About 16 days after first mailing, mail the non-responder letter and another survey form (plus envelope) to those who have not returned the form. An alternative is to telephone non-responders. You want to work for an 80 percent response rate.
- For Telephone Survey
- Contact respondents by phone tallying responses on appropriate individual forms. Mail cover letter, questionnaire, and return envelope to respondents unavailable by phone.
  - Time telephoning so respondents who work are reached at home.
  - Form B requires the graduate's signature granting permission to contact his/her employer. This can be done by mail contact.
-

## GUIDELINES FOR CONDUCTING A FOLLOWUP SURVEY (concluded)

DATA  
ANALYSIS

- Important. The following forms require a small amount of hand coding *before they are sent to the computer.*

| Form            | Item #                                        | Hand Coding Instructions*                                                                                                                                                                                                                                                                                                                |
|-----------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B1<br>and<br>B2 | Coding boxes<br>in upper right<br>hand corner | Code (x) students program as follows:<br>1 = Agriculture<br>2 = Business Education<br>3 = Distributive Education<br>4 = Health Occupations<br>5 = Home Economics<br>6 = Industrial Education<br>7 = Special Needs                                                                                                                        |
| B3<br>and<br>B4 | Coding boxes<br>in upper right<br>hand corner | Code (x) students as either:<br>1 = Sequence Vocational (non-Capstone)<br>2 = General Academic                                                                                                                                                                                                                                           |
| B1<br>and<br>B3 | (E.) 7                                        | Code hourly wage of graduate as follows:<br>1 = under \$2.00 per hour<br>2 = \$2.00 to \$2.99 per hour<br>3 = \$3.00 to \$3.99 per hour<br>4 = \$4.00 to \$4.99 per hour<br>5 = \$5.00 to \$5.99 per hour<br>6 = \$6.00 to \$6.99 per hour<br>7 = \$7.00 to \$7.99 per hour<br>8 = \$8.00 to \$8.99 per hour<br>9 = over \$9.00 per hour |
| B1<br>and<br>B3 | (F.) 8                                        | 1 = Part-time (less than 35 hours per week)<br>2 = Full time (35 or more hours per week)                                                                                                                                                                                                                                                 |
| B1<br>and<br>B3 | 22                                            | 1 = related program, VTAE<br>2 = related program, 4-year university<br>3 = not related to secondary vocational<br>education program                                                                                                                                                                                                      |
| B2<br>and<br>B4 | 3                                             | 1 = directly related to training<br>2 = somewhat related to training<br>3 = not related to training<br>4 = non-traditional job if used                                                                                                                                                                                                   |
| B2<br>and<br>B4 | 5                                             | 1 = on-the-job 3 years or more<br>2 = on-the-job 2-3 years<br>3 = on-the-job 1-2 years<br>4 = on-the-job less than one year                                                                                                                                                                                                              |
| B2              | 20                                            | Same as B1, #22 above.                                                                                                                                                                                                                                                                                                                   |
| C               | Coding box<br>in upper right<br>hand corner   | Code employers as either:<br>1 = Capstone (1)___Related or (2)___Non-<br>Related<br>3 = Sequence Vocational<br>4 = Academic                                                                                                                                                                                                              |

\*Hand coding is best done in colored ink by placing an "x" in the appropriately numbered box. Example:

1 2 ☒ 4

21

## THE SELF EVALUATION REPORT

## Instructions

1. The original signed copy will be kept in the District.

- Each visiting team member will be mailed a copy.
- Selected program personnel will need a copy.
- All mailed copies can be returned after the review is completed if requested by the District.
- One copy to DPI and CVTAE consultants.

2. Prepare a cover page showing:

|                                                                 |                                                                       |
|-----------------------------------------------------------------|-----------------------------------------------------------------------|
| Copy #. _____ of _____                                          | Used by _____<br>(leave blank for<br>name of visiting<br>team member) |
| SELF EVALUATION REPORT<br>of<br>(Name and Location of District) |                                                                       |
| Date _____                                                      |                                                                       |
| Signature _____                                                 |                                                                       |
| Title, (LVEC) _____                                             |                                                                       |

3. Include in the report:

- The cover page with original signatures.
- TABLE OF CONTENTS. Be specific. List each chapter and form individually with page numbers listed for each.
- LIST OF TABLES
- LIST OF FIGURES
- LIST OF EXHIBITS. Items, which by their nature, prohibit their inclusion in the Self Evaluation Report, should be earmarked for exhibit in the evaluation team workroom. These related items can be listed here.

- INTRODUCTION including purpose, approach and organization of the evaluation.
- A list of persons and committees who were involved in the evaluation and in compiling the report. Show names and titles, and where applicable, the group of which each person is representative (e.g., former student, employer, etc.)
- CHAPTER I. The Profile of the School District.
- CHAPTER II. The Profile of the total Vocational/Capstone program.
- CHAPTER III. Data Display in "Working Table" Format. Include:
  - a table of contents,
  - an introduction
  - Form A narrative,
  - Forms B1 - F in working table format,
  - Form G filled in,
  - Form H is included with part one filled in and part two in working table format.
- CHAPTER IV. Data Analyses. Include introduction and "publication tables" featuring significant comparisons and relationships.
- CHAPTER V. Conclusions.

4. Include in APPENDICES:

- Any applicable supporting evidence/ explanations/documentation.

NOTE: Substantiating evidence not attached to the Report itself may be retained at the school in readiness for the Visiting Team. This could include: Course outlines, advisory committee records, guidance materials, budget forms, curriculum guide, proposals, annual reports, Handbooks, computer printouts, etc.

5. Be sure each page is numbered and each item of the Report is marked with appropriate data: heading, location, dates, etc.

*See next page for graphic display*

Example

|  |       |                                                                                   |
|--|-------|-----------------------------------------------------------------------------------|
|  | ----- | Cover page with identifying data.                                                 |
|  | ----- | TABLE OF CONTENTS.                                                                |
|  | ----- | LIST OF TABLES.                                                                   |
|  | ----- | LIST OF FIGURES.                                                                  |
|  | ----- | LIST OF EXHIBITS.                                                                 |
|  | ----- | INTRODUCTION.                                                                     |
|  | ----- | Committees, Evaluators, etc.                                                      |
|  | ----- | CHAPTER I. The District Profile.                                                  |
|  | ----- | CHAPTER II. The Program Profile.                                                  |
|  | ----- | CHAPTER III. Data Display in "Working Table" Format.<br>Forms A through H1 and H2 |
|  | ----- | CHAPTER IV. Data Analyses in "Publication Table"<br>Format.                       |
|  | ----- | CHAPTER V. Conclusions.                                                           |
|  | ----- | APPENDICES.                                                                       |

## PREPARATION FOR THE VISITING TEAM

### Responsibility of the School

Many non-evaluatory plans can best be facilitated by persons located in the District geographical area. Therefore, the school will assume responsibility for completing the following activities and arrangements.

### Preliminary Preparations

1. Carefully read Team Visitation Guidelines.
2. Review potential team roster from the CVTAE with school administrator and LVEC. Finalize the potential list utilizing strike-off privilege, if necessary.
3. Arrange for notification of selected team members and consultants. See sample letters in Appendix H. Complete the Information for Visiting Team form and send to all team members along with personal Data Sheet and a copy of the team roster prepared by CVTAE. See Appendix I for samples.  
NOTE: Team Visitation Guidelines will be sent to members/leader by CVTAE.
4. Review and plan tentative team schedule. Review with team leader to finalize, if possible. (Appendix I, pp. 81-85)
5. Mail Self Evaluation Report and finalized visitation schedule to all members and consultants at least ten days prior to visit. See Appendix I for samples. It is also helpful to include a community map with school and parking accommodations shown.
6. Outline a list of suggested materials that the school can have in readiness for the team. See "Suggested Institutional Materials for Visiting Team," pp. 20-21.
7. Arrange for a team workroom at the main campus building. Arrange for suggested materials to be available in the team workroom as well as telephone, typewriter, paper, clerical help if necessary, and capabilities for xerox, etc. Arrange for school personnel to lay out materials in logical order. The LVEC will explain material arrangement to team members at orientation. Include a floor plan of the school(s).
8. Plan housing through school purchase order, if possible. Reserve hotel/motel rooms for team members (and project and DPI personnel, if necessary). Read "Team Member Finances" in Team Visitation Guidelines, p. 9.
9. Prepare name tags for team members, team leader and consultants, if any. School personnel will also need name tags. Select "student guides" and prepare name tags for them also.
10. Confirm arrangements for scheduled meals and eating facilities planned for on-site visitation.

11. Duplicate (ditto is satisfactory) Team Report format sheets in adequate number to allow approximately 20 for each member plus 50 for draft typing. See Appendix J, p. 86 for example. Duplicate Personal Interview Sheets (See Appendix J, p. 87) to allow two for each team member plus 15 for draft typing.
12. Distribute Team Guidelines to appropriate Program personnel. READ. Program personnel should also receive roster, schedule, assignments, etc., and be aware of all aspects of the on-site visit.
13. Arrange for the team leader to have the following materials in readiness at the team workroom during the time the leader is at the school conducting the pre-visitation activities:
  - Class schedules (including exploratory and sequence courses) for all attendance centers and a list of the vocational teachers with a suggested time for interviews (planning periods).
  - A listing of local Board of Education members, addresses and telephone numbers.
  - A list of the local advisory council members, place of employment, and telephone numbers.
  - A listing of local Capstone graduates and employers, addresses, and telephone numbers.
14. Develop and distribute a series of news releases in team visit phase. Also, employers, graduates, Board members, training sponsors will need to be prepared to receive team interviews (Day One and possibly a.m. of Day Two).
15. Develop "tentative" interview schedules for each team member with vocational staff, administration, etc. Use scheduling procedures outlined in Team Guidelines, pp. 18-20 and Appendix C, pp. 43-45. Distribute to staff. Arrange to assist team leader during pre-visitation work time to complete interview schedule. This activity is critical! (Use Schedule of Interview form, p. 88, adapting as necessary.)

#### During Visitation

1. Host the team/staff introductory meeting. See Team Guidelines, p. 22. (B. 1-6)
2. Have "student guides" identified and in readiness as facilitators for team members (especially student members), if requested.
3. Monitor progress, offer assistance and consultation if needed.
4. Distribute travel vouchers to team leader.
5. Arrange to have typists available on the final evaluation day to type a rough draft of the Team Report. One or two typists can be assigned for the morning; three or four typists will be needed for the

afternoon (if student typists are used, more will be needed). It is essential that the rough draft be completed and edited by the CVTAE consultant before he/she leaves the school. (One or more typists may be asked to stay overtime, if needed.) CVTAE consultant will make and retain a xerox copy of the edited rough-draft team report.

6. The LVEC will be available all day of Day Two as he/she, along with Team Leader, will "hear" reports as they are ready. Each evaluator will read his/her report from the rough draft typed copy. The Team Leader and LVEC will cooperatively either accept each report at this time or require the evaluator to modify it for corrections. Corrected sections must be re-read to the Team Leader and LVEC a second time for acceptance.

#### After Visit

1. Process team member travel vouchers.
2. Type final copy of Team Report from the rough-typed copy which has been edited by the CVTAE consultant.
3. Duplicate the completed Visitation Team Report.
4. Distribute the specified number of copies to the appropriate people.
  - mail 1 copy to DPI consultant (Virgil Martinson)
  - mail 1 copy to CVTAE consultant (Dorothy Dale)

#### Suggested Institutional Materials for Visiting Team

The following list of materials is included as a guide to the LVEC/administrator preparing for a team visit. Include materials only as they relate to the total vocational program. Grouping and identifying these materials in the team workroom can greatly expedite the work and enhance the effectiveness of the team.

(Team members will have received in advance the Self Evaluation Report for study prior to the visit of the team. Some of the items listed below may have been included in the Self Evaluation Report and therefore need not be duplicated in the team workroom.)

- Board of Education Policy Handbook
- School catalog
- Student Handbook
- Local Short and Long Range Plan for Vocational Education
- Enrollment Patterns for last 2-5 years
- Budgets (current and projected) for Department and Discipline Areas
- Advisory Committee rosters and minutes
- Faculty dossiers or biographical sketch showing educational and occupational experience, degree, certification, professional organizations, youth organization leadership, etc.

- Brochures and other publications
- Maps of school layout
- Dictaphone
- Typewriter
- Reports of Institutional research, including:
  - Enrollment statistics
  - Studies of grading practices and distributions
  - Studies of current students
  - Followup studies of former students required by DPI
  - North Central Evaluations
- Course Outlines
- Departmental and Course Objectives
- Master Teacher's Contract
- Pertinent Job Descriptions
- Class schedules
- Laboratory layouts
- Safety program
- Published financial and/or other reports
- Descriptive information about the community
- Local telephone book
- Telephone (if possible)
- Names, addresses, phone numbers of the following groups\*:
  - Employers of Capstone graduates (in the community)
  - Advisory Council members
  - Board of Education members
  - Feeder school personnel (administrative, guidance staff, etc.)
- Curriculum Guide for District Programs (Include elementary and middle school as appropriate.)
- Staff and Administrative charts with names
- Important Incidentals:
  - Paper
  - Pencils
  - Paper Clips
  - Thumb tacks
  - Bulletin Board
  - Stapler
  - Scotch Tape
  - Masking Tape

\*These lists must be made available to the team leader prior to the on-site visit.

### IMPLEMENTATION OF EVALUATION FINDINGS

The value of a well-done program evaluation lies in the utilization of evaluation findings towards improvement of the program. Bridging this gap between data and action forms the third and longest phase of the three-phase Secondary Vocational program evaluation system.

There is no one "correct" way to analyze and utilize evaluation findings. Each program will be challenged to develop its own unique plan of program improvement based upon both the Self Evaluation data and the Team Visitation Report. Any program improvement plan must take into account the documents which are required each year: the accountability report, the program plan, and the five-year plan update. Program improvement plans resulting from the program evaluation can dovetail with vocational long-range plans and give both validation and direction for long-range planning.

At this writing, DPI rules and regulations governing the program evaluation cycle on a state-wide basis are not completed. However, once these have been defined and evaluation procedures are implemented, LVEC's can look toward a definite evaluation time cycle. Each succeeding program evaluation will look toward those evaluations of prior years, how identified strengths were reinforced and how identified weaknesses were addressed.

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NOTE: When copying any Appendix item for inclusion in the Self Evaluation Report, be certain to "white out" any extraneous printing, i.e., "Appendix A," or page numbers.

Table  
ONE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B-1)

Response Percentage = \_\_\_\_\_

|                |                                                                                                                   | Program Data<br>Expressed in Numbers [N] and/or Percents [%] |                  |                                                |  |  |  |  |  |  |  |
|----------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|------------------|------------------------------------------------|--|--|--|--|--|--|--|
|                |                                                                                                                   | TOTAL<br>NUMBER                                              | TOTAL<br>PERCENT | Occupational Areas and/or Capstone<br>Programs |  |  |  |  |  |  |  |
| Item Statement |                                                                                                                   |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                |                                                                                                                   | Total Responses                                              |                  |                                                |  |  |  |  |  |  |  |
| 1.             | What is your current educational status?<br>(Check the appropriate box below)                                     |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Currently attending school (if checked, complete<br>1A1 and 1A2. . . . .                                        |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Not currently attending school . . . . .                                                                        |                                                              |                  |                                                |  |  |  |  |  |  |  |
| 2.             | (1A1) Type of school: (Check one)                                                                                 |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Vocational technical school. . . . .                                                                            |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Four year college/university . . . . .                                                                          |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Other. . . . .                                                                                                  |                                                              |                  |                                                |  |  |  |  |  |  |  |
| 3.             | (1A2) Program of study: (Check one)                                                                               |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Related to high school vocational program. . . . .                                                              |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Not related to high school vocational program. . . . .                                                          |                                                              |                  |                                                |  |  |  |  |  |  |  |
| 4.             | What is your current employment status? (Check one)                                                               |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | A. Employed (includes all employment-full or part-time;<br>does not include full-time military service) . . . . . |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | B. Full-time military service . . . . .                                                                           |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | C. Unemployed (not employed <u>but</u> actively seeking employment).                                              |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | D. Not available for employment (not employed <u>and</u> not seeking<br>employment). . . . .                      |                                                              |                  |                                                |  |  |  |  |  |  |  |
| 5.             | A. Job title. . . . .                                                                                             | X                                                            | X                |                                                |  |  |  |  |  |  |  |
|                | B. Job duties . . . . .                                                                                           | X                                                            | X                |                                                |  |  |  |  |  |  |  |
|                | C. Employer name. . . . .                                                                                         | X                                                            | X                |                                                |  |  |  |  |  |  |  |
| 6.             | May we contact your supervisor in our Employer Followup? . .                                                      |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • No . . . . .                                                                                                    |                                                              |                  |                                                |  |  |  |  |  |  |  |
|                | • Yes...If yes, please give name of immediate supervisor. . .                                                     |                                                              |                  |                                                |  |  |  |  |  |  |  |

APPENDIX A

B1

Program Data  
Expressed in Numbers[N] and/or Percents[%]

Table \_\_\_\_\_ continued

ONE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B1)

| Item Statement                                                                               |      | TOTAL NUMBER | TOTAL PERCENT | Occupational Areas |  |  |  |  |  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------|------|--------------|---------------|--------------------|--|--|--|--|--|--|--|--|--|--|
|                                                                                              | Mean | X            |               |                    |  |  |  |  |  |  |  |  |  |  |
| 7. My present hourly wage grouping before deductions is: [N]                                 |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 0 = omitted. . . . .                                                                         |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 1 = under \$2.00/hour . . . . .                                                              |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 2 = \$2.00 to \$2.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 3 = \$3.00 to \$3.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 4 = \$4.00 to \$4.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 5 = \$5.00 to \$5.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 6 = \$6.00 to \$6.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 7 = \$7.00 to \$7.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 8 = \$8.00 to \$8.99/hour. . . . .                                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 9 = Over \$9.00/hour. . . . .                                                                |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 8. How many <u>hours</u> do you work during an average work week?                            |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 1 = Part-time (less than 35 hours per week). . . . .                                         |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 2 = Full-time (35 or more hours per week). . . . .                                           |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 9. Is this job related to your area of vocational training?                                  |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (1) Yes. . . . .                                                                             |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (2) No . . . . .                                                                             |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 10. Does your present job represent "Self Employment?"                                       |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (1) Yes. . . . .                                                                             |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (2) No . . . . .                                                                             |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| *See end of table for Data Analysis on Questions 11-18                                       |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 19. During my vocational program I was helped to become aware of: [N] (check all that apply) |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| 32 (o) omitted. . . . .                                                                      |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (1) new (emerging occupations) . . . . .                                                     |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (2) male dominated jobs which females now enter. . . . .                                     |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |
| (3) female dominated jobs which males now enter. . . . .                                     |      |              |               |                    |  |  |  |  |  |  |  |  |  |  |

25

B1

33

Program Data  
Expressed in Numbers(N) and/or Percents(%)

Table \_\_\_\_\_ continued

ONE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B1)

| Item Statement                                                                                                               | TOTAL<br>NUMBER | TOTAL<br>PERCENT | Occupational Areas |  |  |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------|--------------------|--|--|--|--|--|--|--|--|--|
|                                                                                                                              |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| 19. (continued)                                                                                                              |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (4) occupations which have many job opportunities. . . . .                                                                   |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (5) occupations which are over-crowded with workers and<br>job applicants . . . . .                                          |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (6) post-high school training opportunities related to<br>my career goal . . . . .                                           |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (7) job alternatives related to my career goal . . . . .                                                                     |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (8) training requirements for related jobs . . . . .                                                                         |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| 20. During my vocational program I filled out a questionnaire or<br>survey about my occupational interests and abilities [%] |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                                                         |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (1) yes. . . . .                                                                                                             |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (2) not sure . . . . .                                                                                                       |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (3) no . . . . .                                                                                                             |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| 21. Since leaving high school I have taken further training in:<br>[N] (check all that apply)                                |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                                                         |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (1) a vocational school one-year diploma program . . . . .                                                                   |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (2) a vocational school two-year associate degree program. .                                                                 |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (3) a four-year university program . . . . .                                                                                 |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (4) an apprenticeship program. . . . .                                                                                       |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (5) an in-service or on-the-job training program . . . . .                                                                   |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (6) I have not taken any further training. . . . .                                                                           |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (7) Other. . . . .                                                                                                           |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| 22. My area or program of study for the training in item 19 is:                                                              |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (1) Related program, VTAE. . . . .                                                                                           |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (2) Related program, 4-year university . . . . .                                                                             |                 |                  |                    |  |  |  |  |  |  |  |  |  |
| (3) Not related to my secondary vocational education<br>program. . . . .                                                     |                 |                  |                    |  |  |  |  |  |  |  |  |  |

B1

Table \_\_\_\_\_ continued

ONE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B1)Program Data  
Expressed in Numbers[N] and/or Percents[%]

| Item Statement |                                                                                                                                | TOTAL NUMBER    | TOTAL PERCENT | Occupational Areas |  |  |  |  |  |  |  |  |  |  |
|----------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|--------------------|--|--|--|--|--|--|--|--|--|--|
|                |                                                                                                                                |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 23.            | How do you feel about the vocational training you received in your high school? (check one) [%]                                | Mean            | X             |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                           |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) I was very unsatisfied . . . . .                                                                                           |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) I was unsatisfied. . . . .                                                                                                 |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) I was satisfied. . . . .                                                                                                   |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (4) I was very satisfied . . . . .                                                                                             |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 24.            | How do you rate the value of the information you received in <u>career guidance</u> or making a career choice? (check one) [N] | Mean            | X             |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                           |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) Low. I was not helped at all. . . . .                                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) Average. I was helped some. . . . .                                                                                        |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) High. I was helped as much as I needed. . . . .                                                                            |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 25.            | <u>This last item is only for those who are unemployed.</u>                                                                    | Total Responses | X             |                    |  |  |  |  |  |  |  |  |  |  |
|                | I am presently unemployed because: (check all that apply)                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                           |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) I do not have enough occupational training . . . . .                                                                       |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) The training was not a good choice. I didn't know enough about my interests and abilities . . . . .                        |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) There is an oversupply of workers in my job field. . . . .                                                                 |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (4) I can't make enough money in the job for which I was trained to make it worth working . . . . .                            |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (5) I am temporarily laid off from my job but believe I'll be called back soon. . . . .                                        |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (6) Other. . . . .                                                                                                             |                 |               |                    |  |  |  |  |  |  |  |  |  |  |

Table  
ONE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B1)

One-year Capstone graduates were asked, "In general, how adequate was your high school vocational training in the following situations?

The following key was used:

|                       |   |          |   |                 |
|-----------------------|---|----------|---|-----------------|
| more than<br>adequate |   | adequate |   | not<br>adequate |
| 5                     | 4 | 3        | 2 | 1               |

N= \_\_\_\_\_ (employed graduates)

| Item Statement                                                                                                | Mean  | Standard Deviation |
|---------------------------------------------------------------------------------------------------------------|-------|--------------------|
| 11. Getting a job. . . . .                                                                                    | _____ | _____              |
| 12. Knowing how to use tools and equipment . . . . .                                                          | _____ | _____              |
| 13. Learning the skills needed for this job. . . . .                                                          | _____ | _____              |
| 14. Getting along with other workers . . . . .                                                                | _____ | _____              |
| 15. Being able to talk to the boss about your problems . . . . .                                              | _____ | _____              |
| 16. Working in a supervisory or leadership role. . . . .                                                      | _____ | _____              |
| 17. Understanding the value and importance of work . . . . .                                                  | _____ | _____              |
| 18. Understanding in general the U.S. economic system. . . . .<br>(supply-demand, inflation, recession, etc.) | _____ | _____              |

B1

The following Standard Deviation key can be used:

- 0 to .60 = Very High Level of Agreement
- .61 to 1.20 = High Level of Agreement
- 1.21 to 1.80 = Moderate Level of Agreement
- 1.81 & above = Low Level of Agreement

## Response Percentage =

Item Statement

### Total Responses

1. I am presently: (check one) [N]

- (0) omitted. . . . .
- (1) employed FULL-time in a paid non-military occupation . . . . .
- (2) employed FULL-time in the military service . . . . .
- (3) employed PART-time - not in school . . . . .
- (4) employed PART-time while in school . . . . .
- (5) full-time student - not employed part-time . . . . .
- (6) full-time homemaker - not looking for paid employment. . . . .
- (7) full-time homemaker - looking for employment . . . . .
- (8) unemployed but looking for paid employment . . . . .
- (9) unemployed - not looking for paid employment . . . . .

2. NOTE: Does the above represent self employment?

- (1) Yes. . . . .
- (2) No . . . . .

3. I am presently employed as: [N]

- (0) omitted. . . . .
- (1) directly related to training . . . . .
- (2) somewhat related to training . . . . .
- (3) not related to training. . . . .
- (4) non-traditional job (if used). . . . .

5. Date employed by present employer: [N]

- (0) omitted. . . . .
- (1) on-the-job 3 years or more . . . . .
- (2) on-the-job 2-3 years . . . . .
- (3) on-the-job 1-2 years . . . . .
- (4) on-the-job less than one year. . . . .

6. Number of jobs held since graduation:

Mean Response =

Occupational Areas

X

**X**

THREE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B2)

Program Data  
Expressed in Numbers[N] and/or Percents[%]

[illegible]

Table \_\_\_\_\_

THREE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B2)

Program Data  
Expressed in Numbers[N] and/or Percents[X]

31

| Item Statement |                                                                                                                                           | TOTAL NUMBER    | TOTAL PERCENT | Occupational Areas |  |  |  |  |  |  |  |  |  |  |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|--------------------|--|--|--|--|--|--|--|--|--|--|
|                |                                                                                                                                           |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 21.            | How do you feel about the vocational training you received at your high school? (check one) [%]                                           | Mean            | X             |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) I was very unsatisfied . . . . .                                                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) I was unsatisfied. . . . .                                                                                                            |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) I was satisfied. . . . .                                                                                                              |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (4) I was very satisfied . . . . .                                                                                                        |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 22.            | How would you rate the value of the information you received in <u>career guidance</u> or <u>making a career choice</u> ? (check one) [N] | Mean            | X             |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) low. I was not helped at all . . . . .                                                                                                |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) average. I was helped some. . . . .                                                                                                   |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) high. I was helped as much as I needed. . . . .                                                                                       |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
| 23.            | <u>This last item is only for those who are unemployed.</u>                                                                               | Total Responses |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | I am presently unemployed because: (check all that apply)                                                                                 |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                      |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (1) I do not have enough occupational training . . . . .                                                                                  |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (2) The training was not a good choice. I didn't know enough about my interests and abilities . . . . .                                   |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (3) There is an oversupply of workers in my job field. . . . .                                                                            |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (4) I can't make enough money in the job for which I was trained to make it worth working . . . . .                                       |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (5) I am temporarily laid off from my job but believe I'll be called back soon. . . . .                                                   |                 |               |                    |  |  |  |  |  |  |  |  |  |  |
|                | (6) Other. . . . .                                                                                                                        |                 |               |                    |  |  |  |  |  |  |  |  |  |  |

B2

45

Table  
THREE-YEAR CAPSTONE FOLLOWUP SURVEY  
(Form B2)

Three-year Capstone graduates were asked, "In general, how adequate was your high school vocational training in the following situations?"

The following key was used:

|                       |   |          |   |                 |
|-----------------------|---|----------|---|-----------------|
| more than<br>adequate |   | adequate |   | not<br>adequate |
| 5                     | 4 | 3        | 2 | 1               |

N= \_\_\_\_\_

| Item Statement                                                                                                | Mean  | Standard<br>Deviation |
|---------------------------------------------------------------------------------------------------------------|-------|-----------------------|
| 7. Getting a job. . . . .                                                                                     | _____ | _____                 |
| 8. Knowing how to use tools and equipment . . . . .                                                           | _____ | _____                 |
| 9. Learning the skills needed for this job. . . . .                                                           | _____ | _____                 |
| 10. Getting along with other workers . . . . .                                                                | _____ | _____                 |
| 11. Being able to talk to the boss about your problems . . . . .                                              | _____ | _____                 |
| 12. Working in a supervisory or leadership role. . . . .                                                      | _____ | _____                 |
| 13. Moving up on the job . . . . .                                                                            | _____ | _____                 |
| 14. Moving to other jobs which do not necessarily involve a promotion. .                                      | _____ | _____                 |
| 15. Understanding the value and importance of work . . . . .                                                  | _____ | _____                 |
| 16. Understanding in general the U.S. economic system (supply-demand,<br>inflation, recession, etc.). . . . . | _____ | _____                 |

B2

The following Standard Deviation key can be used:

- 0 to .60 = Very High Level of Agreement
- .61 to 1.20 = High Level of Agreement
- 1.21 to 1.80 = Moderate Level of Agreement
- 1.81 & above = Low Level of Agreement

Table  
ONE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B-3)

Response Percentage = \_\_\_\_\_

Identify: (1) \_\_\_\_\_ Sequence Vocational (non-Capstone)  
(2) \_\_\_\_\_ General (academic)

Program Data  
Expressed in Numbers [N] and/or Percents [%]  
= 11 Areas

| ONE-YEAR GRADUATE FOLLOWUP SURVEY<br>(Form B-3)                                                                |                        |                                                          |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------|--|--|--|--|
|                                                                                                                | Total Number           | Total Percent                                            |  |  |  |  |
| Identify:                                                                                                      | (1) _____<br>(2) _____ | Sequence Vocational (non-Capstone)<br>General (academic) |  |  |  |  |
| Item Statement                                                                                                 |                        |                                                          |  |  |  |  |
|                                                                                                                | Total Responses        |                                                          |  |  |  |  |
| 1. What is your current educational status?<br>(Check the appropriate box below)                               |                        |                                                          |  |  |  |  |
| • Currently attending school ( <i>if checked, complete 1A1 and 1A2.</i> ) . . . . .                            |                        |                                                          |  |  |  |  |
| • Not currently attending school . . . . .                                                                     |                        |                                                          |  |  |  |  |
| 2. (1A1) Type of school: ( <i>Check one</i> )                                                                  |                        |                                                          |  |  |  |  |
| • Vocational technical school. . . . .                                                                         |                        |                                                          |  |  |  |  |
| • Four year college/university . . . . .                                                                       |                        |                                                          |  |  |  |  |
| • Other. . . . .                                                                                               |                        |                                                          |  |  |  |  |
| 3. (1A2) Program of study: ( <i>Check one</i> )                                                                |                        |                                                          |  |  |  |  |
| • Related to high school vocational program. . . . .                                                           |                        |                                                          |  |  |  |  |
| • Not related to high school vocational program. . . . .                                                       |                        |                                                          |  |  |  |  |
| 4. What is your current employment status? ( <i>Check one</i> )                                                |                        |                                                          |  |  |  |  |
| A. Employed (includes all employment-full or part-time; does not include full-time military service) . . . . . |                        |                                                          |  |  |  |  |
| B. Full-time military service . . . . .                                                                        |                        |                                                          |  |  |  |  |
| C. Unemployed (not employed <u>but</u> actively seeking employment). . . . .                                   |                        |                                                          |  |  |  |  |
| D. Not available for employment (not employed <u>and</u> not seeking employment). . . . .                      |                        |                                                          |  |  |  |  |
| 5. A. Job title. . . . .                                                                                       | X                      | X                                                        |  |  |  |  |
| B. Job duties . . . . .                                                                                        | X                      | X                                                        |  |  |  |  |
| C. Employer name. . . . .                                                                                      | X                      | X                                                        |  |  |  |  |
| 6. May we contact your supervisor in our Employer Followup?. . .                                               |                        |                                                          |  |  |  |  |
| • No . . . . .                                                                                                 |                        |                                                          |  |  |  |  |
| • Yes...If yes, please give name of immediate supervisor.. .                                                   |                        |                                                          |  |  |  |  |

Program Data  
Expressed in Numbers[N] and/or Percents[%]

Table \_\_\_\_\_ continued

ONE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B3)

| Item Statement                                                                               | TOTAL NUMBER | TOTAL PERCENT | Areas |  |  |  |  |
|----------------------------------------------------------------------------------------------|--------------|---------------|-------|--|--|--|--|
|                                                                                              |              |               |       |  |  |  |  |
| Mean                                                                                         |              | X             |       |  |  |  |  |
| 7. My present hourly wage grouping before deductions is: [N]                                 |              |               |       |  |  |  |  |
| 0 = omitted. . . . .                                                                         |              |               |       |  |  |  |  |
| 1 = under \$2.00/hour . . . . .                                                              |              |               |       |  |  |  |  |
| 2 = \$2.00 to \$2.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 3 = \$3.00 to \$3.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 4 = \$4.00 to \$4.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 5 = \$5.00 to \$5.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 6 = \$6.00 to \$6.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 7 = \$7.00 to \$7.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 8 = \$8.00 to \$8.99/hour. . . . .                                                           |              |               |       |  |  |  |  |
| 9 = Over \$9.00/hour. . . . .                                                                |              |               |       |  |  |  |  |
| 8. How many <u>hours</u> do you work during an average work week?                            |              |               |       |  |  |  |  |
| 1 = Part-time (less than 35 hours per week). . . . .                                         |              |               |       |  |  |  |  |
| 2 = Full-time (35 or more hours per week). . . . .                                           |              |               |       |  |  |  |  |
| 9. Is this job related to your area of vocational training?                                  |              |               |       |  |  |  |  |
| (1) Yes. . . . .                                                                             |              |               |       |  |  |  |  |
| (2) No . . . . .                                                                             |              |               |       |  |  |  |  |
| 10. Does your present job represent "Self Employment?"                                       |              |               |       |  |  |  |  |
| (1) Yes. . . . .                                                                             |              |               |       |  |  |  |  |
| (2) No . . . . .                                                                             |              |               |       |  |  |  |  |
| *See end of table for Data Analysis on Questions 11-18                                       |              |               |       |  |  |  |  |
| 19. During my vocational program I was helped to become aware of: [N] (check all that apply) |              |               |       |  |  |  |  |
| (a) omitted. . . . .                                                                         |              |               |       |  |  |  |  |
| (1) new (emerging occupations) . . . . .                                                     |              |               |       |  |  |  |  |
| (2) male dominated jobs which females now enter. . . . .                                     |              |               |       |  |  |  |  |
| (3) female dominated jobs which males now enter. . . . .                                     |              |               |       |  |  |  |  |

B3

Table \_\_\_\_\_ continued

ONE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B3)

Program Data  
Expressed in Numbers [N] and/or Percents [%]

| Item Statement                                                                                                               | TOTAL NUMBER | TOTAL PERCENT | Areas |  |  |  |  |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------|--------------|---------------|-------|--|--|--|--|--|--|--|--|--|--|--|
|                                                                                                                              |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| 19. (continued)                                                                                                              |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (4) occupations which have many job opportunities. . . . .                                                                   |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (5) occupations which are over-crowded with workers and<br>job applicants . . . . .                                          |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (6) post-high school training opportunities related to<br>my career goal . . . . .                                           |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (7) job alternatives related to my career goal . . . . .                                                                     |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (8) training requirements for related jobs . . . . .                                                                         |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| 20. During my vocational program I filled out a questionnaire or<br>survey about my occupational interests and abilities [%] |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                                                         |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (1) yes. . . . .                                                                                                             |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (2) not sure . . . . .                                                                                                       |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (3) no . . . . .                                                                                                             |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| 21. Since leaving high school I have taken further training in:<br>[N] (check all that apply)                                |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                                                         |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (1) a vocational school one-year diploma program . . . . .                                                                   |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (2) a vocational school two-year associate degree program. .                                                                 |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (3) a four-year university program . . . . .                                                                                 |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (4) an apprenticeship program. . . . .                                                                                       |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (5) an in-service or on-the-job training program . . . . .                                                                   |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (6) I have not taken any further training. . . . .                                                                           |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (7) Other. . . . .                                                                                                           |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| 22. My area or program of study for the training in item 19 is:                                                              |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| 52 (1) Related program, VTAE. . . . .                                                                                        |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (2) Related program, 4-year university . . . . .                                                                             |              |               |       |  |  |  |  |  |  |  |  |  |  |  |
| (3) Not related to my secondary vocational education<br>program. . . . .                                                     |              |               |       |  |  |  |  |  |  |  |  |  |  |  |

Table \_\_\_\_\_ continued

Program Data  
Expressed in Numbers [N] and/or Percents [%]ONE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B3)

| Item Statement |                                                                                                                                        | TOTAL NUMBER    | TOTAL PERCENT | Areas |  |  |  |  |  |  |  |  |  |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|-------|--|--|--|--|--|--|--|--|--|
|                |                                                                                                                                        |                 |               |       |  |  |  |  |  |  |  |  |  |
| 23.            | How do you feel about the vocational training you received in your high school? (check one) [%]                                        | Mean            | X             |       |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (1) I was very unsatisfied . . . . .                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (2) I was unsatisfied. . . . .                                                                                                         |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (3) I was satisfied. . . . .                                                                                                           |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (4) I was very satisfied . . . . .                                                                                                     |                 |               |       |  |  |  |  |  |  |  |  |  |
| 24.            | How do you rate the value of the information you received in <u>career guidance</u> or <u>making a career choice</u> ? (check one) [N] | Mean            | X             |       |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (1) Low. I was not helped at all. . . . .                                                                                              |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (2) Average. I was helped some. . . . .                                                                                                |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (3) High. I was helped as much as I needed. . . . .                                                                                    |                 |               |       |  |  |  |  |  |  |  |  |  |
| 25.            | <u>This last item is only for those who are unemployed.</u>                                                                            | Total Responses | X             |       |  |  |  |  |  |  |  |  |  |
|                | I am presently unemployed because: (check all that apply)                                                                              |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (1) I do not have enough occupational training . . . . .                                                                               |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (2) The training was not a good choice. I didn't know enough about my interests and abilities . . . . .                                |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (3) There is an oversupply of workers in my job field. . . . .                                                                         |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (4) I can't make enough money in the job for which I was trained to make it worth working . . . . .                                    |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (5) I am temporarily laid off from my job but believe I'll be called back soon. . . . .                                                |                 |               |       |  |  |  |  |  |  |  |  |  |
|                | (6) Other. . . . .                                                                                                                     |                 |               |       |  |  |  |  |  |  |  |  |  |

B3

Table \_\_\_\_\_  
 ONE-YEAR GRADUATE FOLLOWUP SURVEY  
 (Form B3)

37

One-year Capstone graduates were asked, "In general, how adequate was your high school vocational training in the following situations?"

The following key was used:

|  |                       |   |          |   |                 |
|--|-----------------------|---|----------|---|-----------------|
|  | more than<br>adequate |   | adequate |   | not<br>adequate |
|  | 5                     | 4 | 3        | 2 | 1               |

N= \_\_\_\_\_ (employed graduates)

| Item Statement                                                                                                | Mean  | Standard Deviation |
|---------------------------------------------------------------------------------------------------------------|-------|--------------------|
| 11. Getting a job. . . . .                                                                                    | _____ | _____              |
| 12. Knowing how to use tools and equipment . . . . .                                                          | _____ | _____              |
| 13. Learning the skills needed for this job. . . . .                                                          | _____ | _____              |
| 14. Getting along with other workers . . . . .                                                                | _____ | _____              |
| 15. Being able to talk to the boss about your problems . . . . .                                              | _____ | _____              |
| 16. Working in a supervisory or leadership role. . . . .                                                      | _____ | _____              |
| 17. Understanding the value and importance of work . . . . .                                                  | _____ | _____              |
| 18. Understanding in general the U.S. economic system. . . . .<br>(supply-demand, inflation, recession, etc.) | _____ | _____              |

B3

The following Standard Deviation key can be used:

53

0 to .60 = Very High Level of Agreement  
 .61 to 1.20 = High Level of Agreement  
 1.21 to 1.80 = Moderate Level of Agreement  
 1.81 & above = Low Level of Agreement

54

Table  
THREE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B-4)

Program Data  
Expressed in Numbers[N] and/or Percents[%]

Response Percentage = \_\_\_\_\_

Identify: (1) \_\_\_\_\_ Sequence Vocational (non-Capstone)  
(2) \_\_\_\_\_ General (academic)

| TOTAL NUMBER                                                   | TOTAL PERCENT          | Areas |  |  |  |  |  |  |  |  |  |
|----------------------------------------------------------------|------------------------|-------|--|--|--|--|--|--|--|--|--|
|                                                                |                        |       |  |  |  |  |  |  |  |  |  |
| <b>Item Statement</b>                                          |                        |       |  |  |  |  |  |  |  |  |  |
|                                                                | <b>Total Responses</b> | X     |  |  |  |  |  |  |  |  |  |
| 1. I am presently: (check one) [N]                             |                        |       |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                           |                        |       |  |  |  |  |  |  |  |  |  |
| (1) employed FULL time in a paid non-military occupation . . . |                        |       |  |  |  |  |  |  |  |  |  |
| (2) employed FULL time in the military service . . . . .       |                        |       |  |  |  |  |  |  |  |  |  |
| (3) employed PART time - not in school . . . . .               |                        |       |  |  |  |  |  |  |  |  |  |
| (4) employed PART time while in school . . . . .               |                        |       |  |  |  |  |  |  |  |  |  |
| (5) full time student - not employed part time . . . . .       |                        |       |  |  |  |  |  |  |  |  |  |
| (6) full time homemaker - not looking for paid employment. . . |                        |       |  |  |  |  |  |  |  |  |  |
| (7) full time homemaker - looking for paid employemnt. . . . . |                        |       |  |  |  |  |  |  |  |  |  |
| (8) unemployed but looking for paid employment . . . . .       |                        |       |  |  |  |  |  |  |  |  |  |
| (9) unemployed - not looking for paid employment . . . . .     |                        |       |  |  |  |  |  |  |  |  |  |
| 2. NOTE: Does the above represent self employment?             |                        |       |  |  |  |  |  |  |  |  |  |
| (1) Yes . . . . .                                              |                        |       |  |  |  |  |  |  |  |  |  |
| (2) No. . . . .                                                |                        |       |  |  |  |  |  |  |  |  |  |
| 3. I am presently employed as: [N]                             |                        |       |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                           |                        |       |  |  |  |  |  |  |  |  |  |
| (1) directly related to training . . . . .                     |                        |       |  |  |  |  |  |  |  |  |  |
| (2) somewhat related to training . . . . .                     |                        |       |  |  |  |  |  |  |  |  |  |
| (3) not related to training. . . . .                           |                        |       |  |  |  |  |  |  |  |  |  |
| (4) non-traditional job (if used). . . . .                     |                        |       |  |  |  |  |  |  |  |  |  |
| 5. Date employed by present employer: [N]                      |                        |       |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                           |                        |       |  |  |  |  |  |  |  |  |  |
| (1) on-the-job 3 years or more . . . . .                       |                        |       |  |  |  |  |  |  |  |  |  |
| (2) on-the-job 2-3 years . . . . .                             |                        |       |  |  |  |  |  |  |  |  |  |
| (3) on-the-job 1-2 years . . . . .                             |                        |       |  |  |  |  |  |  |  |  |  |
| (4) on-the-job less than one year. . . . .                     |                        |       |  |  |  |  |  |  |  |  |  |
| 6. Number of jobs held since graduation:                       |                        | X     |  |  |  |  |  |  |  |  |  |

Mean Response=

B4

Table  
THREE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B4)

39

Three-year graduates were asked, "In general, how adequate was your high school vocational training in the following situations?"

The following key was used:

|                       |   |   |   |                 |
|-----------------------|---|---|---|-----------------|
| more than<br>adequate |   |   |   | not<br>adequate |
| 5                     | 4 | 3 | 2 | 1               |

N= \_\_\_\_\_

| Item Statement                                                                                                | Mean  | Standard<br>Deviation |
|---------------------------------------------------------------------------------------------------------------|-------|-----------------------|
| 7. Getting a job. . . . .                                                                                     | _____ | _____                 |
| 8. Knowing how to use tools and equipment . . . . .                                                           | _____ | _____                 |
| 9. Learning the skills needed for this job. . . . .                                                           | _____ | _____                 |
| 10. Getting along with other workers . . . . .                                                                | _____ | _____                 |
| 11. Being able to talk to the boss about your problems . . . . .                                              | _____ | _____                 |
| 12. Working in a supervisory or leadership role. . . . .                                                      | _____ | _____                 |
| 13. Moving up on the job . . . . .                                                                            | _____ | _____                 |
| 14. Moving to other jobs which do not necessarily involve a promotion. .                                      | _____ | _____                 |
| 15. Understanding the value and importance of work . . . . .                                                  | _____ | _____                 |
| 16. Understanding in general the U.S. economic system (supply-demand,<br>inflation, recession, etc.). . . . . | _____ | _____                 |

B4

60

The following Standard Deviation key can be used:

- 0 to .60 = Very High Level of Agreement
- .61 to 1.20 = High Level of Agreement
- 1.21 to 1.80 = Moderate Level of Agreement
- 1.81 & above = Low Level of Agreement

61

Table \_\_\_\_\_ continued

THREE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B4)

Program Data  
Expressed in Numbers[N] and/or Percents[%]

| Item Statement                                                                            | TOTAL NUMBER | TOTAL PERCENT | Areas |  |  |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------|--------------|---------------|-------|--|--|--|--|--|--|--|--|--|
|                                                                                           |              |               |       |  |  |  |  |  |  |  |  |  |
| 17. My present hourly wage group before deductions is: [N]                                |              |               |       |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                      |              |               |       |  |  |  |  |  |  |  |  |  |
| (1) under \$2.00/hour . . . . .                                                           |              |               |       |  |  |  |  |  |  |  |  |  |
| (2) \$2.00 to \$2.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (3) \$3.00 to \$3.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (4) \$4.00 to \$4.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (5) \$5.00 to \$5.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (6) \$6.00 to \$6.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (7) \$7.00 to \$7.99/hour. . . . .                                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (8) Over \$8.00/hour. . . . .                                                             |              |               |       |  |  |  |  |  |  |  |  |  |
| 19. Since leaving high school I have taken further training in:<br>(check all that apply) |              |               |       |  |  |  |  |  |  |  |  |  |
| (0) omitted. . . . .                                                                      |              |               |       |  |  |  |  |  |  |  |  |  |
| (1) a vocational school one-year diploma program . . . . .                                |              |               |       |  |  |  |  |  |  |  |  |  |
| (2) a vocational school two-year associate degree program. .                              |              |               |       |  |  |  |  |  |  |  |  |  |
| (3) a four-year university program . . . . .                                              |              |               |       |  |  |  |  |  |  |  |  |  |
| (4) an apprenticeship program. . . . .                                                    |              |               |       |  |  |  |  |  |  |  |  |  |
| (5) an in-service or on-the-job training program . . . . .                                |              |               |       |  |  |  |  |  |  |  |  |  |
| (6) I have not taken any further training. . . . .                                        |              |               |       |  |  |  |  |  |  |  |  |  |
| (7) Other. . . . .                                                                        |              |               |       |  |  |  |  |  |  |  |  |  |

B4

20. X

Table \_\_\_\_\_ continued

THREE-YEAR GRADUATE FOLLOWUP SURVEY  
(Form B4)Program Data  
Expressed in Numbers [N] and/or Percents [%]

| Item Statement |                                                                                                                                        | TOTAL NUMBER    | TOTAL PERCENT | Areas |  |  |  |  |  |  |  |  |  |  |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|-------|--|--|--|--|--|--|--|--|--|--|
|                |                                                                                                                                        |                 |               |       |  |  |  |  |  |  |  |  |  |  |
| 21.            | How do you feel about the vocational training you received in your high school? (check one) [%]                                        | Mean            | X             |       |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (1) I was very unsatisfied . . . . .                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (2) I was unsatisfied. . . . .                                                                                                         |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (3) I was satisfied. . . . .                                                                                                           |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (4) I was very satisfied . . . . .                                                                                                     |                 |               |       |  |  |  |  |  |  |  |  |  |  |
| 22.            | How do you rate the value of the information you received in <u>career guidance</u> or <u>making a career choice</u> ? (check one) [N] | Mean            |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (1) Low. I was not helped at all. . . . .                                                                                              |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (2) Average. I was helped some. . . . .                                                                                                |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (3) High. I was helped as much as I needed. . . . .                                                                                    |                 |               |       |  |  |  |  |  |  |  |  |  |  |
| 23.            | <u>This last item is only for those who are unemployed.</u>                                                                            | Total Responses |               |       |  |  |  |  |  |  |  |  |  |  |
|                | I am presently unemployed because: (check all that apply)                                                                              |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (0) omitted. . . . .                                                                                                                   |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (1) I do not have enough occupational training . . . . .                                                                               |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (2) The training was not a good choice. I didn't know enough about my interests and abilities . . . . .                                |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (3) There is an oversupply of workers in my job field. . . . .                                                                         |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (4) I can't make enough money in the job for which I was trained to make it worth working . . . . .                                    |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (5) I am temporarily laid off from my job but believe I'll be called back soon. . . . .                                                |                 |               |       |  |  |  |  |  |  |  |  |  |  |
|                | (6) Other. . . . .                                                                                                                     |                 |               |       |  |  |  |  |  |  |  |  |  |  |

Table \_\_\_\_\_  
EMPLOYERS FOLLOWUP SURVEY  
(Form C)

Response Percentage = \_\_\_\_\_

| Table<br>EMPLOYERS FOLLOWUP SURVEY<br>(Form C)                                                                                             |  | TOTAL, PERCENT |  | TOTAL, NUMBER |  | Employers of: |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|--|---------------|--|---------------|--------------|----------------------|-----------------------------|---------------|--|----------------------|--|--|--|--|--|--|--|
|                                                                                                                                            |  |                |  |               |  | Capstone      |              |                      | Sequence<br>Vocational<br>N | Academic<br>N |  |                      |  |  |  |  |  |  |  |
|                                                                                                                                            |  |                |  |               |  | Total<br>N    | Related<br>N | Non-<br>Related<br>N |                             |               |  |                      |  |  |  |  |  |  |  |
| Item Statement                                                                                                                             |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| Employers were asked to rate the vocational training received by the graduate in the following three areas:                                |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
|                                                                                                                                            |  |                |  |               |  |               |              |                      |                             |               |  | Total Responses: [N] |  |  |  |  |  |  |  |
| 1. Technical Knowledge                                                                                                                     |  | Mean           |  | X             |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (5) Very good. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (4) Good . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (3) Average. . . . .                                                                                                                       |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (2) Poor . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (1) Very poor. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| 2. Work Attitude                                                                                                                           |  | Mean           |  | X             |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (5) Very good. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (4) Good . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (3) Average. . . . .                                                                                                                       |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (2) Poor . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (1) Very poor. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| 3. Work Quality                                                                                                                            |  | Mean           |  | X             |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (5) Very good. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (4) Good . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (3) Average. . . . .                                                                                                                       |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (2) Poor . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (1) Very poor. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| 4. What is your overall rating of the vocational training received by this individual as it relates to the requirements of his or her job? |  | Mean           |  | X             |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (5) Very good. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (4) Good . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (3) Average. . . . .                                                                                                                       |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (2) Poor . . . . .                                                                                                                         |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |
| (1) Very poor. . . . .                                                                                                                     |  |                |  |               |  |               |              |                      |                             |               |  |                      |  |  |  |  |  |  |  |

Program Data  
Expressed in Numbers [N] and/or Percents [%]

Table \_\_\_\_\_

EMPLOYERS FOLLOWUP SURVEY (continued)  
(Form C)

Response Percentage = \_\_\_\_\_

| Item Statement                                                                                                                                                                                   | TOTAL NUMBER | TOTAL PERCENT | Employers of: |              |                      |                             |               |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|---------------|---------------|--------------|----------------------|-----------------------------|---------------|--|--|
|                                                                                                                                                                                                  |              |               | Capstone      |              |                      | Sequence<br>Vocational<br>N | Academic<br>N |  |  |
|                                                                                                                                                                                                  |              |               | Total<br>N    | Related<br>N | Non-<br>Related<br>N |                             |               |  |  |
| Total Responses [N]                                                                                                                                                                              |              |               |               |              |                      |                             |               |  |  |
| 5. As a result of this person's vocational training, how would you rate his or her preparation in relation to other employees in his or her work group who did <u>not</u> receive such training. |              |               |               |              |                      |                             |               |  |  |
| (5) Individual is better prepared. . . . .                                                                                                                                                       |              |               |               |              |                      |                             |               |  |  |
| (3) Both are about the same. . . . .                                                                                                                                                             |              |               |               |              |                      |                             |               |  |  |
| (1) Individual is less prepared. . . . .                                                                                                                                                         |              |               |               |              |                      |                             |               |  |  |
| (0) No basis for comparison. . . . .                                                                                                                                                             |              |               |               |              |                      |                             |               |  |  |
| 6. From past experience, would you prefer to hire persons who have had high school vocational training? [%]                                                                                      |              |               |               |              |                      |                             |               |  |  |
| (0) Omitted. . . . .                                                                                                                                                                             |              |               |               |              |                      |                             |               |  |  |
| (1) No preference. . . . .                                                                                                                                                                       |              |               |               |              |                      |                             |               |  |  |
| (2) Some preference. . . . .                                                                                                                                                                     |              |               |               |              |                      |                             |               |  |  |
| (3) A good deal of preference. . . . .                                                                                                                                                           |              |               |               |              |                      |                             |               |  |  |
| 7. Have you had occasion to change the job status of this employee in any of the following ways? [%]                                                                                             |              |               |               |              |                      |                             |               |  |  |
| (0) Omitted. . . . .                                                                                                                                                                             |              |               |               |              |                      |                             |               |  |  |
| (1) No change. . . . .                                                                                                                                                                           |              |               |               |              |                      |                             |               |  |  |
| (2) Demotion . . . . .                                                                                                                                                                           |              |               |               |              |                      |                             |               |  |  |
| (3) Move to another job not involving promotion or demotion.                                                                                                                                     |              |               |               |              |                      |                             |               |  |  |
| (4) Promotion. . . . .                                                                                                                                                                           |              |               |               |              |                      |                             |               |  |  |
| 8. What has been this employee's attitude toward on-the-job training? [%]                                                                                                                        |              |               |               |              |                      |                             |               |  |  |
| (0) Omitted. . . . .                                                                                                                                                                             |              |               |               |              |                      |                             |               |  |  |
| (1) No training has been offered . . . . .                                                                                                                                                       |              |               |               |              |                      |                             |               |  |  |
| (2) Negative, resists training . . . . .                                                                                                                                                         |              |               |               |              |                      |                             |               |  |  |
| (3) Acceptant, but needs prodding. . . . .                                                                                                                                                       |              |               |               |              |                      |                             |               |  |  |
| (4) Positive, willing to learn . . . . .                                                                                                                                                         |              |               |               |              |                      |                             |               |  |  |
| (5) Very positive, eager to learn. . . . .                                                                                                                                                       |              |               |               |              |                      |                             |               |  |  |

Table  
EMPLOYER FOLLOWUP SURVEY (concluded)  
(Form C)

Employers were asked, "In the following aspects of employment, how well prepared was this employee for the job for which hired?" Mean responses and Standard Deviation are shown below.

| Item Statements                                                                                             | Mean | SD  |
|-------------------------------------------------------------------------------------------------------------|------|-----|
| 9. Use of tools and equipment. . . . .                                                                      | ___  | ___ |
| 10. Selection and care of space, materials and supplies . . . .                                             | ___  | ___ |
| 11. Quantity of work, output of satisfactory amount . . . . .                                               | ___  | ___ |
| 12. Ability to work with co-workers . . . . .                                                               | ___  | ___ |
| 13. Accepting advise and supervision. . . . .                                                               | ___  | ___ |
| 14. Working in a leadership role. . . . .                                                                   | ___  | ___ |
| 15. Understanding the importance and value of work. . . . .                                                 | ___  | ___ |
| 16. Understanding, in general U.S. economic system (supply-demand,<br>inflation, recession, etc.) . . . . . | ___  | ___ |

Employers were asked, "Please rate this employee on each of the personal qualities listed below." Mean responses and Standard Deviation are shown below.

| Item Statements                                                                             | Mean | SD  |
|---------------------------------------------------------------------------------------------|------|-----|
| 17. DEPENDABILITY: Promptness and reliance in attendance . . .                              | ___  | ___ |
| 18. RESPONSIBILITY: Willingness with which work is accepted<br>and performed. . . . .       | ___  | ___ |
| 19. INITIATIVE: Ability to plan and direct own work. . . . .                                | ___  | ___ |
| 20. JUDGMENT: Ability to work in harmony with others . . . . .                              | ___  | ___ |
| 21. COOPERATION: Ability to work in harmony with others. . . .                              | ___  | ___ |
| 22. LEADERSHIP: Qualities of understanding people and directing<br>work of others . . . . . | ___  | ___ |
| 23. COURTESY & FRIENDLINESS: Shows consideration and kindness<br>towards others . . . . .   | ___  | ___ |
| 24. PERSONAL APPEARANCE: Neatness, cleanliness, appropriate<br>dress and grooming. . . . .  | ___  | ___ |

Class Size Data  
 APPENDIX C (Fill in total N for each group,  
 M and F, and indicate sampling plan)

|                             | <u>N</u> | <u>PLAN</u>  |
|-----------------------------|----------|--------------|
| Table _____                 |          | Male _____   |
| STUDENT QUESTIONNAIRE _____ |          | Female _____ |
| (Form D1) _____             |          | _____        |

Students were asked to respond to the following statements as they related to their vocational program involvement. Shown here is RESPONSE BY GRADE LEVELS

| Item Statements                                                      | Student Response |   |      |   |        |   |
|----------------------------------------------------------------------|------------------|---|------|---|--------|---|
|                                                                      | Total            |   | Male |   | Female |   |
|                                                                      | N                | % | N    | % | N      | % |
| 1. The grade I am in is:                                             |                  |   |      |   |        |   |
| (1) 9th. . . . .                                                     |                  |   |      |   |        |   |
| (2) 10th . . . . .                                                   |                  |   |      |   |        |   |
| (3) 11th . . . . .                                                   |                  |   |      |   |        |   |
| (4) 12th . . . . .                                                   |                  |   |      |   |        |   |
| 2. The program where my main career interest lie is:                 |                  |   |      |   |        |   |
| (1) Agriculture. . . . .                                             |                  |   |      |   |        |   |
| (2) Business Education . . . . .                                     |                  |   |      |   |        |   |
| (3) Distributive Education . . . . .                                 |                  |   |      |   |        |   |
| (4) Health Occupations . . . . .                                     |                  |   |      |   |        |   |
| (5) Home Economics . . . . .                                         |                  |   |      |   |        |   |
| (6) Industrial Education . . . . .                                   |                  |   |      |   |        |   |
| (7) General Education. . . . .                                       |                  |   |      |   |        |   |
| 3. I am a member of the following vocational student organizations:  |                  |   |      |   |        |   |
| (1) DECA . . . . .                                                   |                  |   |      |   |        |   |
| (2) FBLA . . . . .                                                   |                  |   |      |   |        |   |
| (3) FFA. . . . .                                                     |                  |   |      |   |        |   |
| (4) FTA. . . . .                                                     |                  |   |      |   |        |   |
| (5) HERO . . . . .                                                   |                  |   |      |   |        |   |
| (6) VICA . . . . .                                                   |                  |   |      |   |        |   |
| (7) FHA. . . . .                                                     |                  |   |      |   |        |   |
| (8) Other. . . . .                                                   |                  |   |      |   |        |   |
| (9) None . . . . .                                                   |                  |   |      |   |        |   |
| 4. The vocational student organization of which I am a member meets: |                  |   |      |   |        |   |
| (1) I am not a member. . . . .                                       |                  |   |      |   |        |   |
| (2) Once a month . . . . .                                           |                  |   |      |   |        |   |
| (3) Twice a month. . . . .                                           |                  |   |      |   |        |   |
| (4) Two or three times a semester . . . . .                          |                  |   |      |   |        |   |
| (5) Two or three times a year. . . . .                               |                  |   |      |   |        |   |
| (6) Less than three times a year . . . . .                           |                  |   |      |   |        |   |
| (7) Other. . . . .                                                   |                  |   |      |   |        |   |

## STUDENT QUESTIONNAIRE

| Item Statements                                                                                       | Student Response |   |      |   |        |   |
|-------------------------------------------------------------------------------------------------------|------------------|---|------|---|--------|---|
|                                                                                                       | Total            |   | Male |   | Female |   |
|                                                                                                       | N                | % | N    | % | N      | % |
| 5. I have previously filled out a questionnaire or survey about my occupational interests.            |                  |   |      |   |        |   |
| (1) Yes. . . . .                                                                                      |                  |   |      |   |        |   |
| (2) ?. . . . .                                                                                        |                  |   |      |   |        |   |
| (3) No . . . . .                                                                                      |                  |   |      |   |        |   |
| 6. Last year I met with a counselor:                                                                  |                  |   |      |   |        |   |
| (1) More than five times. . . . .                                                                     |                  |   |      |   |        |   |
| (2) Four or five times. . . . .                                                                       |                  |   |      |   |        |   |
| (3) Two or three times. . . . .                                                                       |                  |   |      |   |        |   |
| (4) Once. . . . .                                                                                     |                  |   |      |   |        |   |
| (5) Never . . . . .                                                                                   |                  |   |      |   |        |   |
| 7. I would rate my counselor's knowledge of the world of work:                                        |                  |   |      |   |        |   |
| (1) High - knows most occupations.                                                                    |                  |   |      |   |        |   |
| (2) Average - knows about some occupations . . . . .                                                  |                  |   |      |   |        |   |
| (3) Below average - knows very little about occupations. . .                                          |                  |   |      |   |        |   |
| (4) I don't know - we never talked about occupations. . .                                             |                  |   |      |   |        |   |
| 8. I would rate my vocational instructor's knowledge of the world of work:                            |                  |   |      |   |        |   |
| (1) High - knows a lot about occupations . . . . .                                                    |                  |   |      |   |        |   |
| (2) Average - knows something about occupations . . . . .                                             |                  |   |      |   |        |   |
| (3) Below average - knows very little about occupations. . .                                          |                  |   |      |   |        |   |
| (4) I don't know - we never talked about occupations. . .                                             |                  |   |      |   |        |   |
| 9. I am aware of the vocational programs in my high school and objectives or goals of these programs. |                  |   |      |   |        |   |
| (1) Yes . . . . .                                                                                     |                  |   |      |   |        |   |
| (2) Some. . . . .                                                                                     |                  |   |      |   |        |   |
| (3) No. . . . .                                                                                       |                  |   |      |   |        |   |

Table \_\_\_\_\_ continued

## STUDENT QUESTIONNAIRE

| Item Statements                                                                                                     | Student Response |   |      |   |        |   |
|---------------------------------------------------------------------------------------------------------------------|------------------|---|------|---|--------|---|
|                                                                                                                     | Total            |   | Male |   | Female |   |
|                                                                                                                     | N                | % | N    | % | N      | % |
| 10. This is how I feel about the vocational training I am receiving at present.                                     |                  |   |      |   |        |   |
| (1) I am very unsatisfied . . . . .                                                                                 |                  |   |      |   |        |   |
| (2) I am unsatisfied . . . . .                                                                                      |                  |   |      |   |        |   |
| (3) I am satisfied . . . . .                                                                                        |                  |   |      |   |        |   |
| (4) I am very satisfied. . . . .                                                                                    |                  |   |      |   |        |   |
| 11. Instructors in my vocational program have used a variety of teaching methods such as:<br>(check all that apply) |                  |   |      |   |        |   |
| (1) Lecture. . . . .                                                                                                |                  |   |      |   |        |   |
| (2) Discussion . . . . .                                                                                            |                  |   |      |   |        |   |
| (3) Films. . . . .                                                                                                  |                  |   |      |   |        |   |
| (4) Field trips. . . . .                                                                                            |                  |   |      |   |        |   |
| (5) Demonstrations . . . . .                                                                                        |                  |   |      |   |        |   |
| (6) Role playing . . . . .                                                                                          |                  |   |      |   |        |   |
| (7) Outside speakers . . . . .                                                                                      |                  |   |      |   |        |   |
| (8) Learning packages. . . . .                                                                                      |                  |   |      |   |        |   |
| (9) Project activities . . . . .                                                                                    |                  |   |      |   |        |   |
| 12. Instructors in my vocational program presented course content in a form that helped me to learn.                |                  |   |      |   |        |   |
| (1) Yes, <u>most</u> of the time. . . . .                                                                           |                  |   |      |   |        |   |
| (2) Yes, <u>some</u> of the time. . . . .                                                                           |                  |   |      |   |        |   |
| (3) No . . . . .                                                                                                    |                  |   |      |   |        |   |
| 13. My on-the-job training was directly related to classroom instruction.                                           |                  |   |      |   |        |   |
| (1) Yes. . . . .                                                                                                    |                  |   |      |   |        |   |
| (2) Only occasionally. . . . .                                                                                      |                  |   |      |   |        |   |
| (3) No . . . . .                                                                                                    |                  |   |      |   |        |   |
| (4) I have not had on-the-job training . . . . .                                                                    |                  |   |      |   |        |   |

## STUDENT QUESTIONNAIRE

| Item Statements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Student Response |   |      |   |        |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---|------|---|--------|---|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Total            |   | Male |   | Female |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | N                | % | N    | % | N      | % |
| 14. During my vocational program I have learned about: (check all that apply)<br><br>(1) new (emerging occupations).<br>(2) male dominated jobs which females can now enter . . . . .<br>(3) female dominated jobs which males can now enter . . . . .<br>(4) occupations which have many job opportunities . . . . .<br>(5) occupations which are over-crowded with workers and applicants. . . . .<br>(6) post-high school training opportunities related to my career goal . . . . .<br>(7) job alternatives related to my career goal. . . . . |                  |   |      |   |        |   |
| 15. I rate my high school vocational program in terms of preparation for an occupation as:<br><br>(1) High - it will help me find or keep a job . . . . .<br>(2) Average - it may help me find and/or keep a job . . . . .<br>(3) Low - it will not help me find and/or keep a job . . . . .                                                                                                                                                                                                                                                       |                  |   |      |   |        |   |
| 16. Following high school I plan to:<br><br>(1) go to work, (if checked, go to Item 17 and complete) . . . . .<br>(2) go on to school, (if checked, go to Item 18 and complete) . . . . .<br>(3) other (explain) _____<br>(if checked, you have completed this survey). . . . .                                                                                                                                                                                                                                                                    |                  |   |      |   |        |   |

## STUDENT QUESTIONNAIRE

| Item Statements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Student Response |   |      |   |        |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---|------|---|--------|---|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Total            |   | Male |   | Female |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | N                | % | N    | % | N      | % |
| 17. These items refer to your immediate post-high school job. (check all that apply)<br><br>(1) I already have found a job. . .<br>(2) I plan to work in a job related to my high school vocational program . . . . .<br>(3) I plan to work in a job which is not related to my high school vocational training . . . . .                                                                                                                                                                                   |                  |   |      |   |        |   |
| 18. These items refer to your immediate post-high school education plans. (check all that apply) I plan to enroll in an additional program:<br><br>(1) related to my high school vocational program. . . . .<br>(2) <u>not</u> related to my high school vocational program. . . . .<br>(3) in a vocational school one-year diploma program . . . . .<br>(4) in a vocational program two-year associate degree program. . . .<br>(5) in a four-year university . . .<br>(6) in a apprenticeship program . . |                  |   |      |   |        |   |

Class Enrollment Data  
(Fill in total N for each  
program and indicate sampling  
plan)

D1

50

Table \_\_\_\_\_

N PLAN STUDENT QUESTIONNAIRE  
 \_\_\_\_\_ Agriculture \_\_\_\_\_  
 \_\_\_\_\_ Business Ed. \_\_\_\_\_  
 \_\_\_\_\_ Dist. Ed. \_\_\_\_\_  
 \_\_\_\_\_ Health Occ. \_\_\_\_\_

N PLAN  
 \_\_\_\_\_ Home Ec. \_\_\_\_\_  
 \_\_\_\_\_ Ind. Ed. \_\_\_\_\_  
 \_\_\_\_\_ General Ed. \_\_\_\_\_

Students were asked to respond to the following statements as they related to their  
vocational program involvement. Shown here is RESPONSE BY PROGRAM

N= \_\_\_\_\_

| Item Statements                                                      | Student Responses |   |          |   |           |   |        |   |          |   |          |   |          |   |
|----------------------------------------------------------------------|-------------------|---|----------|---|-----------|---|--------|---|----------|---|----------|---|----------|---|
|                                                                      | Agricul.          |   | Bus. Ed. |   | Dist. Ed. |   | Health |   | Home Ec. |   | Ind. Ed. |   | Gen. Ed. |   |
|                                                                      | N                 | % | N        | % | N         | % | N      | % | N        | % | N        | % | N        | % |
| 1. The grade I am in is:                                             |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (1) 9th . . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (2) 10th. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (3) 11th. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (4) 12th. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| 2. The program where my main career interests lie is:                |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (1) Agriculture . . . . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (2) Business Education. .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (3) Distributive Education                                           |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (4) Health Occupations. .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (5) Home Economics. . . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (6) Industrial Education.                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (7) General Education . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| 3. I am a member of the following student organizations:             |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (1) DECA. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (2) FBLA. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (3) FFA . . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (4) FTA . . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (5) HERO. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (6) VICA. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (7) FHA . . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (8) Other . . . . .                                                  |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (9) None. . . . .                                                    |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| 4. The vocational student organization of which I am a member meets: |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (1) I am not a member . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (2) Once a month. . . . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (3) Twice a month . . . .                                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (4) Two or three times a semester. . . . .                           |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (5) Two or three times a year. . . . .                               |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (6) Less than three times a year. . . . .                            |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |
| (7) Other . . . . .                                                  |                   |   |          |   |           |   |        |   |          |   |          |   |          |   |

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## STUDENT QUESTIONNAIRE

Table \_\_\_\_\_ continued

N= \_\_\_\_\_

| Item Statements                                                                                                                                                                                                                                                                                                                                                                            | Student Response     |                      |                       |                    |                      |                      |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|-----------------------|--------------------|----------------------|----------------------|-------------|--|
|                                                                                                                                                                                                                                                                                                                                                                                            | Agricul.<br>N      % | Bus. Ed.<br>N      % | Dist. Ed.<br>N      % | Health<br>N      % | Home Ec.<br>N      % | Ind. Ed.<br>N      % | Gen. E<br>N |  |
| 9. I am aware of vocational programs in my high school and objectives or goals of these programs.<br><br>(1) Yes. . . . .<br>(2) Some . . . . .<br>(3) No . . . . .                                                                                                                                                                                                                        |                      |                      |                       |                    |                      |                      |             |  |
| 10. This is how I feel about the vocational training I am receiving at present.<br><br>(1) I am very unsatisfied. .<br>(2) I am unsatisfied . . . .<br>(3) I am satisfied . . . . .<br>(4) I am very satisfied. . .                                                                                                                                                                        |                      |                      |                       |                    |                      |                      |             |  |
| 11. Instructors in my vocational program have used a variety of teaching methods such as: (check all that apply)<br><br>(1) Lecture. . . . .<br>(2) Discussion . . . . .<br>(3) Films. . . . .<br>(4) Field trips. . . . .<br>(5) Demonstrations . . . . .<br>(6) Role playing . . . . .<br>(7) Outside speakers . . . .<br>(8) Learning packages. . . .<br>(9) Project activities . . . . |                      |                      |                       |                    |                      |                      |             |  |
| 12. Instructors in my vocational program presented course content in a form that helped me to learn.<br><br>(1) Yes, <u>most</u> of the time. .<br>(2) Yes, <u>some</u> of the time. .<br>(3) No . . . . .                                                                                                                                                                                 |                      |                      |                       |                    |                      |                      |             |  |

Table \_\_\_\_\_ continued

## STUDENT QUESTIONNAIRE

N= \_\_\_\_\_

| Item Statements                                                                            | Student Response   |                    |                     |                  |                    |                    |                    |  |
|--------------------------------------------------------------------------------------------|--------------------|--------------------|---------------------|------------------|--------------------|--------------------|--------------------|--|
|                                                                                            | Agricul.<br>N    % | Bus. Ed.<br>N    % | Dist. Ed.<br>N    % | Health<br>N    % | Home Ec.<br>N    % | Ind. Ed.<br>N    % | Gen. Ed.<br>N    % |  |
| 13. My on-the-job training was directly related to class-room instruction.                 |                    |                    |                     |                  |                    |                    |                    |  |
| (1) Yes. . . . .                                                                           |                    |                    |                     |                  |                    |                    |                    |  |
| (2) Only occasionally. . . . .                                                             |                    |                    |                     |                  |                    |                    |                    |  |
| (3) No . . . . .                                                                           |                    |                    |                     |                  |                    |                    |                    |  |
| (4) I have not had on-the-job training . . . . .                                           |                    |                    |                     |                  |                    |                    |                    |  |
| 14. During my vocational program I have learned about: (check all that apply)              |                    |                    |                     |                  |                    |                    |                    |  |
| (1) new (emerging) occupations. . . . .                                                    |                    |                    |                     |                  |                    |                    |                    |  |
| (2) male dominated jobs which females now can enter. . . . .                               |                    |                    |                     |                  |                    |                    |                    |  |
| (3) female dominated jobs which males can now enter. . . . .                               |                    |                    |                     |                  |                    |                    |                    |  |
| (4) occupations which have many job opportunities .                                        |                    |                    |                     |                  |                    |                    |                    |  |
| (5) occupations which are overcrowded with workers and applicants . . . . .                |                    |                    |                     |                  |                    |                    |                    |  |
| (6) post-high school training opportunities related to my career goal . .                  |                    |                    |                     |                  |                    |                    |                    |  |
| (7) job alternatives related to my career goal. . . .                                      |                    |                    |                     |                  |                    |                    |                    |  |
| 15. I rate my high school vocational program in terms of preparation for an occupation as: |                    |                    |                     |                  |                    |                    |                    |  |
| (1) High - it will help me find and/or keep a job .                                        |                    |                    |                     |                  |                    |                    |                    |  |
| (2) Average - it may help me find and/or keep a job .                                      |                    |                    |                     |                  |                    |                    |                    |  |
| (3) Low - it will not help me find and/or keep a job .                                     |                    |                    |                     |                  |                    |                    |                    |  |

Table \_\_\_\_\_ concluded

## STUDENT QUESTIONNAIRE

N= \_\_\_\_\_

| Item Statements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Student Response |   |          |   |           |   |        |   |          |   |          |   |          |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---|----------|---|-----------|---|--------|---|----------|---|----------|---|----------|---|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Agricul.         |   | Bus. Ed. |   | Dist. Ed. |   | Health |   | Home Ec. |   | Ind. Ed. |   | Gen. Ed. |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | N                | % | N        | % | N         | % | N      | % | N        | % | N        | % | N        | % |
| 16. Following high school, I plan to:<br><br>(1) go to work, (if checked, go to Item 17 and complete). . . . .<br>(2) go on to school, (if checked, go to Item 18 and complete) . . . . .<br>(3) other, (explain) _____<br>(if checked, you have completed this survey).                                                                                                                                                                                                                                      |                  |   |          |   |           |   |        |   |          |   |          |   |          |   |
| 17. These items refer to your immediate post-high school job. (check all that apply)<br><br>(1) I already have found a job . . . . .<br>(2) I plan to work in a job related to my high school vocational program. . . .<br>(3) I plan to work in a job which is <u>not</u> related to my high school vocational program . . . . .                                                                                                                                                                             |                  |   |          |   |           |   |        |   |          |   |          |   |          |   |
| 18. These items refer to your immediate post-high school education plans. (check all that apply) I plan to enroll in an educational program:<br><br>(1) related to my high school vocational program. . . .<br>(2) <u>not</u> related to my high school vocational program . . . . .<br>(3) in a vocational school one-year diploma program.<br>(4) in a vocational school two-year associate degree program . . . . .<br>(5) in a four-year university. . . . .<br>(6) in an apprenticeship program. . . . . |                  |   |          |   |           |   |        |   |          |   |          |   |          |   |

Table \_\_\_\_\_  
STUDENT INTEREST SURVEY  
(Form D2)

Students were asked to respond to the following statements indicating their interest in vocational education and career planning. Shown here is RESPONSE BY GRADE LEVEL.

Indicate sampling method here \_\_\_\_\_

N= \_\_\_\_\_

| Item Statements                                                                        | Student Response |   |      |   |      |   |      |   |     |   |
|----------------------------------------------------------------------------------------|------------------|---|------|---|------|---|------|---|-----|---|
|                                                                                        | Total            |   | 12th |   | 11th |   | 10th |   | 9th |   |
|                                                                                        | N                | % | N    | % | N    | % | N    | % | N   | % |
| 1 - 3. (Demographic information)                                                       |                  | X |      | X |      | X |      | X |     | X |
| 4. What general category of courses are you taking in high school?                     |                  |   |      |   |      |   |      |   |     |   |
| (1) College preparation . . . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (2) General education . . . . .                                                        |                  |   |      |   |      |   |      |   |     |   |
| (3) Vocational education. . . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| 5. How did you happen to select the program (category of courses) checked in #4 above? |                  |   |      |   |      |   |      |   |     |   |
| (1) Preparation for College . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (2) Had a special interest. . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (3) Influenced by counselor . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (4) Influenced by parents . . . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (5) Preparation for Vocation . .                                                       |                  |   |      |   |      |   |      |   |     |   |
| (6) Just exploring. . . . .                                                            |                  |   |      |   |      |   |      |   |     |   |
| (7) Don't know why. . . . .                                                            |                  |   |      |   |      |   |      |   |     |   |
| (8) Just placed there . . . . .                                                        |                  |   |      |   |      |   |      |   |     |   |
| (9) Other _____ . .                                                                    |                  |   |      |   |      |   |      |   |     |   |
| 6. What type of school are you planning to attend following high school graduation?    |                  |   |      |   |      |   |      |   |     |   |
| (1) a vocational school one-year diploma program . . . . .                             |                  |   |      |   |      |   |      |   |     |   |
| (2) a vocational school two-year associate degree program. . .                         |                  |   |      |   |      |   |      |   |     |   |
| (3) a four-year university program                                                     |                  |   |      |   |      |   |      |   |     |   |
| (4) an apprenticeship program . .                                                      |                  |   |      |   |      |   |      |   |     |   |
| (5) an in-service or on-the-job training program. . . . .                              |                  |   |      |   |      |   |      |   |     |   |
| (6) Other . . . . .                                                                    |                  |   |      |   |      |   |      |   |     |   |
| (7) None. I do not plan to go on to school at this time . .                            |                  |   |      |   |      |   |      |   |     |   |

## STUDENT INTEREST SURVEY

Table \_\_\_\_\_ continued

N= \_\_\_\_\_

| Item Statements                                                                              | Student Response |   |      |   |      |   |      |   |     |   |
|----------------------------------------------------------------------------------------------|------------------|---|------|---|------|---|------|---|-----|---|
|                                                                                              | Total            |   | 12th |   | 11th |   | 10th |   | 9th |   |
|                                                                                              | N                | % | N    | % | N    | % | N    | % | N   | % |
| 7. What occupation or career do you plan to pursue after high school?                        |                  |   |      |   |      |   |      |   |     |   |
| (1) Not sure of career choice at this time. . . . .                                          |                  |   |      |   |      |   |      |   |     |   |
| (2) I am planning on entering the following careers: (open-ended)                            |                  |   |      |   |      |   |      |   |     |   |
| _____                                                                                        |                  |   |      |   |      |   |      |   |     |   |
| _____                                                                                        |                  |   |      |   |      |   |      |   |     |   |
| _____                                                                                        |                  |   |      |   |      |   |      |   |     |   |
| _____                                                                                        |                  |   |      |   |      |   |      |   |     |   |
| _____                                                                                        |                  |   |      |   |      |   |      |   |     |   |
| 8. Are you aware of the qualifications and training needed to enter this career or school?   |                  |   |      |   |      |   |      |   |     |   |
| (1) Yes. . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (2) No . . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (3) I do not have a planned career/school. . . . .                                           |                  |   |      |   |      |   |      |   |     |   |
| 9. Do you feel that your present curriculum is preparing you for your planned career/school? |                  |   |      |   |      |   |      |   |     |   |
| (1) Yes. . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (2) No . . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (3) I do not have a planned career/school. . . . .                                           |                  |   |      |   |      |   |      |   |     |   |
| 10. Are you aware of your career interests?                                                  |                  |   |      |   |      |   |      |   |     |   |
| (1) Yes. . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (2) No . . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| 11. Are you aware of your abilities?                                                         |                  |   |      |   |      |   |      |   |     |   |
| (1) Yes. . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |
| (2) No . . . . .                                                                             |                  |   |      |   |      |   |      |   |     |   |

Table \_\_\_\_\_ concluded

## STUDENT INTEREST SURVEY

N= \_\_\_\_\_

| Item Statements                                                                            | Student Response |      |      |      |     |
|--------------------------------------------------------------------------------------------|------------------|------|------|------|-----|
|                                                                                            | Total            | 12th | 11th | 10th | 9th |
|                                                                                            | N %              | N %  | N %  | N %  | N % |
| 12. Are you, at present, working outside of school hours?                                  |                  |      |      |      |     |
| (1) Yes. . . . .                                                                           |                  |      |      |      |     |
| (2) No . . . . .                                                                           |                  |      |      |      |     |
| If yes, where: (Open-ended) _____                                                          |                  |      |      |      |     |
| _____                                                                                      |                  |      |      |      |     |
| _____                                                                                      |                  |      |      |      |     |
| _____                                                                                      |                  |      |      |      |     |
| 13. How aware are you of the vocational training programs in your school?                  |                  |      |      |      |     |
| (1) I have not received any information. . . . .                                           |                  |      |      |      |     |
| (2) I know about the program related to my career interest. . . . .                        |                  |      |      |      |     |
| (3) I am aware of my school's vocational programs for a variety of career choices. . . . . |                  |      |      |      |     |
| 14. Last year I met with a guidance counselor:                                             |                  |      |      |      |     |
| (1) More than five times . . . . .                                                         |                  |      |      |      |     |
| (2) Four or five times . . . . .                                                           |                  |      |      |      |     |
| (3) Two or three times . . . . .                                                           |                  |      |      |      |     |
| (4) Once . . . . .                                                                         |                  |      |      |      |     |
| (5) Never. . . . .                                                                         |                  |      |      |      |     |
| 15. Do you want help in planning your career?                                              |                  |      |      |      |     |
| (1) Yes. . . . .                                                                           |                  |      |      |      |     |
| (2) No . . . . .                                                                           |                  |      |      |      |     |

Table \_\_\_\_\_  
STUDENT INTEREST SURVEY  
(Form D2)

Students were asked to respond to the following statements indicating their interest in vocational education and career planning. Shown here is RESPONSE BY COURSE PREPARATION.

Indicate sampling method here \_\_\_\_\_

N= \_\_\_\_\_

| Item Statements                                                                        | Student Response |   |            |   |          |   |          |   |
|----------------------------------------------------------------------------------------|------------------|---|------------|---|----------|---|----------|---|
|                                                                                        | Total            |   | Col. Prep. |   | Gen. Ed. |   | Voc. Ed. |   |
|                                                                                        | N                | % | N          | % | N        | % | N        | % |
| 1 - 3. (Demographic information)                                                       |                  |   |            |   |          |   |          |   |
|                                                                                        |                  | X |            | X |          | X |          | X |
| 4. What general category of courses are you taking in high school?                     |                  |   |            |   |          |   |          |   |
| (1) College preparation . . . . .                                                      |                  |   |            |   |          |   |          |   |
| (2) General education . . . . .                                                        |                  |   |            |   |          |   |          |   |
| (3) Vocational education. . . . .                                                      |                  |   |            |   |          |   |          |   |
| 5. How did you happen to select the program (category of courses) checked in #4 above? |                  |   |            |   |          |   |          |   |
| (1) Preparation for College . . . . .                                                  |                  |   |            |   |          |   |          |   |
| (2) Had a special interest. . . . .                                                    |                  |   |            |   |          |   |          |   |
| (3) Influenced by counselor . . . . .                                                  |                  |   |            |   |          |   |          |   |
| (4) Influenced by parents . . . . .                                                    |                  |   |            |   |          |   |          |   |
| (5) Preparation for vocation (job). . . . .                                            |                  |   |            |   |          |   |          |   |
| (6) Just exploring. . . . .                                                            |                  |   |            |   |          |   |          |   |
| (7) Don't know why. . . . .                                                            |                  |   |            |   |          |   |          |   |
| (8) Just placed there . . . . .                                                        |                  |   |            |   |          |   |          |   |
| (9) Other _____ . . . . .                                                              |                  |   |            |   |          |   |          |   |
| 6. What type of school are you planning to attend following high school graduation?    |                  |   |            |   |          |   |          |   |
| (1) a vocational school one-year diploma program . . . . .                             |                  |   |            |   |          |   |          |   |
| (2) a vocational school two-year associate degree program. . . . .                     |                  |   |            |   |          |   |          |   |
| (3) a four-year university program. . . . .                                            |                  |   |            |   |          |   |          |   |
| (4) an apprenticeship program . . . . .                                                |                  |   |            |   |          |   |          |   |
| (5) an in-service or on-the-job training program . . . . .                             |                  |   |            |   |          |   |          |   |
| (6) Other . . . . .                                                                    |                  |   |            |   |          |   |          |   |
| (7) None. I do not plan to go on to school at this time . . . . .                      |                  |   |            |   |          |   |          |   |

Table \_\_\_\_\_ continued

## STUDENT INTEREST SURVEY

| Item Statements                                                                              | N= _____ |   |                   |                 |
|----------------------------------------------------------------------------------------------|----------|---|-------------------|-----------------|
|                                                                                              | Total    |   | Student Response  |                 |
|                                                                                              | N        | % | Col. Prep.<br>N % | Gen. Ed.<br>N % |
| 7. What occupation or career do you plan to pursue after high school?                        |          |   |                   |                 |
| (1) Not sure of career choice at this time. . . . .                                          |          |   |                   |                 |
| (2) I am planning on entering the following careers (open-ended).                            |          |   |                   |                 |
| _____                                                                                        |          |   |                   |                 |
| _____                                                                                        |          |   |                   |                 |
| _____                                                                                        |          |   |                   |                 |
| _____                                                                                        |          |   |                   |                 |
| _____                                                                                        |          |   |                   |                 |
| 8. Are you aware of the qualifications and training needed to enter this career or school?   |          |   |                   |                 |
| (1) Yes . . . . .                                                                            |          |   |                   |                 |
| (2) No. . . . .                                                                              |          |   |                   |                 |
| (3) I do not have a planned career/school . . . . .                                          |          |   |                   |                 |
| 9. Do you feel that your present curriculum is preparing you for your planned career/school? |          |   |                   |                 |
| (1) Yes . . . . .                                                                            |          |   |                   |                 |
| (2) No. . . . .                                                                              |          |   |                   |                 |
| (3) I do not have a planned career/school. . . . .                                           |          |   |                   |                 |
| 10. Are you aware of your career interests?                                                  |          |   |                   |                 |
| (1) Yes . . . . .                                                                            |          |   |                   |                 |
| (2) No. . . . .                                                                              |          |   |                   |                 |
| 11. Are you aware of your abilities?                                                         |          |   |                   |                 |
| (1) Yes . . . . .                                                                            |          |   |                   |                 |
| (2) No. . . . .                                                                              |          |   |                   |                 |

Table \_\_\_\_\_ concluded

STUDENT INTEREST SURVEY

N= \_\_\_\_\_

| Item Statements                                                                             | Student Response |   |            |   |          |   |          |   |
|---------------------------------------------------------------------------------------------|------------------|---|------------|---|----------|---|----------|---|
|                                                                                             | Total            |   | Col. Prep. |   | Gen. Ed. |   | Voc. Ed. |   |
|                                                                                             | N                | % | N          | % | N        | % | N        | % |
| 12. Are you, at present, working outside of school hours?                                   |                  |   |            |   |          |   |          |   |
| (1) Yes. . . . .                                                                            |                  |   |            |   |          |   |          |   |
| (2) No . . . . .                                                                            |                  |   |            |   |          |   |          |   |
| If yes, where: (open-ended) _____                                                           |                  |   |            |   |          |   |          |   |
| _____                                                                                       |                  |   |            |   |          |   |          |   |
| _____                                                                                       |                  |   |            |   |          |   |          |   |
| _____                                                                                       |                  |   |            |   |          |   |          |   |
| _____                                                                                       |                  |   |            |   |          |   |          |   |
| 13. How aware are you of the vocational training programs in your school?                   |                  |   |            |   |          |   |          |   |
| (1) I have not received any information . . .                                               |                  |   |            |   |          |   |          |   |
| (2) I know about the program related to my career interest. . . . .                         |                  |   |            |   |          |   |          |   |
| (3) I am aware of my school's vocational programs for a variety of career choices . . . . . |                  |   |            |   |          |   |          |   |
| 14. Last year I met with a guidance counselor:                                              |                  |   |            |   |          |   |          |   |
| (1) More than five times. . . . .                                                           |                  |   |            |   |          |   |          |   |
| (2) Four or five times. . . . .                                                             |                  |   |            |   |          |   |          |   |
| (3) Two or three times. . . . .                                                             |                  |   |            |   |          |   |          |   |
| (4) Once. . . . .                                                                           |                  |   |            |   |          |   |          |   |
| (5) Never . . . . .                                                                         |                  |   |            |   |          |   |          |   |
| 15. Do you want help in planning your career?                                               |                  |   |            |   |          |   |          |   |
| (1) Yes. . . . .                                                                            |                  |   |            |   |          |   |          |   |
| (2) No . . . . .                                                                            |                  |   |            |   |          |   |          |   |

Table \_\_\_\_\_  
 VOCATIONAL STAFF FORM  
 (Form E)

## APPENDIX D

Were all vocational staff surveyed?

\_\_\_\_ Yes \_\_\_\_ No  
 If no, indicate sampling plan here \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Staff response to the following item statements as they related to vocational program involvement.

Response as percentage \_\_\_\_\_ N= \_\_\_\_\_

| Item Statement                                                                                                               | Omits | N | % | Item Statement                                                                                                                          | Omits | N | % |
|------------------------------------------------------------------------------------------------------------------------------|-------|---|---|-----------------------------------------------------------------------------------------------------------------------------------------|-------|---|---|
| 1. My present primary position is: _____                                                                                     |       |   |   | 4. As a staff member, I feel I have input in the following course activities: (check all that apply) _____                              |       |   |   |
| 1. Instruction _____                                                                                                         |       |   |   | 1. Identifying AV and other media needs _____                                                                                           |       |   |   |
| 2. Counseling (advising) _____                                                                                               |       |   |   | 2. Updating curriculum _____                                                                                                            |       |   |   |
| 3. Administration/Coordination _____                                                                                         |       |   |   | 3. Developing task analyses _____                                                                                                       |       |   |   |
| 4. Other _____                                                                                                               |       |   |   | 4. Identifying and utilizing community resources in my class _____                                                                      |       |   |   |
| 2. Do guidance, administrative and instructional personnel work together in identifying students' needs and interests? _____ |       |   |   | 5. Other _____                                                                                                                          |       |   |   |
| 1. No _____                                                                                                                  |       |   |   | 5. Are the vocational courses sequentially structured into programs? _____                                                              |       |   |   |
| 2. Little _____                                                                                                              |       |   |   | 1. Yes _____                                                                                                                            |       |   |   |
| 3. Moderately _____                                                                                                          |       |   |   | 2. No _____                                                                                                                             |       |   |   |
| 4. Extensively _____                                                                                                         |       |   |   | 6. Are there attainable measurable objectives for the district's total vocational program? _____                                        |       |   |   |
| 3. As a staff member, I feel I have input in the following program activities: (check all that apply) _____                  |       |   |   | 1. Yes _____                                                                                                                            |       |   |   |
| 1. Identifying student's needs and interests _____                                                                           |       |   |   | 2. Not sure _____                                                                                                                       |       |   |   |
| 2. Identifying facilities/equipment needs _____                                                                              |       |   |   | 3. No _____                                                                                                                             |       |   |   |
| 3. Planning for shared programs with other districts _____                                                                   |       |   |   | 7. Are there attainable and measureable objectives for the vocational program in which you teach, administer or provide guidance? _____ |       |   |   |
| 4. Developing philosophy, goal and objective statements _____                                                                |       |   |   | 1. Yes _____                                                                                                                            |       |   |   |
| 5. Vocational program planning _____                                                                                         |       |   |   | 2. Not sure _____                                                                                                                       |       |   |   |
| 6. Establishing budget allocations _____                                                                                     |       |   |   | 3. No _____                                                                                                                             |       |   |   |
| 7. Vocational program evaluation _____                                                                                       |       |   |   |                                                                                                                                         |       |   |   |
| 8. Identifying and using advisory committee _____                                                                            |       |   |   |                                                                                                                                         |       |   |   |

Table \_\_\_\_\_ continued

## VOCATIONAL STAFF FORM

N= \_\_\_\_\_

| Item Statement                                                                                                                                | Omits | N   | %   | Item Statement                                                                                                                                 | Omits | N   | %   |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|-----|------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|-----|
| 8. Are there attainable and measurable objectives for the vocational <u>courses</u> which you teach, administer or provide guidance?<br>_____ |       |     |     | 12. I believe the advisory committee(s) have contributed in identifying the needs of the people that the Capstone program must serve.<br>_____ |       |     |     |
| 1. Yes                                                                                                                                        |       | ___ | ___ | 1. Strongly Disagree                                                                                                                           |       | ___ | ___ |
| 2. Not sure                                                                                                                                   |       | ___ | ___ | 2. Disagree                                                                                                                                    |       | ___ | ___ |
| 3. No                                                                                                                                         |       | ___ | ___ | 3. Undecided                                                                                                                                   |       | ___ | ___ |
|                                                                                                                                               |       |     |     | 4. Agree                                                                                                                                       |       | ___ | ___ |
|                                                                                                                                               |       |     |     | 5. Strongly Agree                                                                                                                              |       | ___ | ___ |
|                                                                                                                                               |       |     |     | Mean Response _____                                                                                                                            |       |     |     |
| 9. Which term describes your local district evaluation system for vocational education?<br>_____                                              |       |     |     | 13. I feed the advise given by the advisory committee(s) has (have) been considered/utilized by the people in the Capstone program.<br>_____   |       |     |     |
| 1. <u>Formal</u> : a district-wide evaluation system exists which provides information for program improvement and planning.                  |       | ___ | ___ | 1. Strongly Disagree                                                                                                                           |       | ___ | ___ |
| 2. <u>Informal</u> : unrelated evaluation processes exist.                                                                                    |       | ___ | ___ | 2. Disagree                                                                                                                                    |       | ___ | ___ |
| 3. None: no planned evaluation activities exist.                                                                                              |       | ___ | ___ | 3. Undecided                                                                                                                                   |       | ___ | ___ |
|                                                                                                                                               |       |     |     | 4. Agree                                                                                                                                       |       | ___ | ___ |
|                                                                                                                                               |       |     |     | 5. Strongly Agree                                                                                                                              |       | ___ | ___ |
|                                                                                                                                               |       |     |     | Mean Response _____                                                                                                                            |       |     |     |
| 10. Are you familiar with your school's plan for identifying special needs students? _____                                                    |       |     |     |                                                                                                                                                |       |     |     |
| 1. Yes                                                                                                                                        |       | ___ | ___ |                                                                                                                                                |       |     |     |
| 2. Not sure                                                                                                                                   |       | ___ | ___ |                                                                                                                                                |       |     |     |
| 3. No                                                                                                                                         |       | ___ | ___ |                                                                                                                                                |       |     |     |
|                                                                                                                                               |       |     |     |                                                                                                                                                |       |     |     |
| 11. Are additional services provided for special needs students (other than special education)?<br>_____                                      |       |     |     |                                                                                                                                                |       |     |     |
| 1. Yes                                                                                                                                        |       | ___ | ___ |                                                                                                                                                |       |     |     |
| 2. Not sure                                                                                                                                   |       | ___ | ___ |                                                                                                                                                |       |     |     |
| 3. No                                                                                                                                         |       | ___ | ___ |                                                                                                                                                |       |     |     |

Table \_\_\_\_ concluded

## VOCATIONAL STAFF FORM

In these final items, vocational staff were asked to rate the strengths and weaknesses of certain aspects of the school's vocational program.  
The following key was used:

- 5 = Very Strong
- 4 = Strong
- 3 = Acceptable
- 2 = Weak
- 1 = Very Weak

| Item Statements                                                          | Mean  | St. Dev. |
|--------------------------------------------------------------------------|-------|----------|
| 14. Putting goals and objectives to use in the classroom.                | _____ | _____    |
| 15. Appropriate and adequate facilities.                                 | _____ | _____    |
| 16. Adequate and available resource centers.                             | _____ | _____    |
| 17. Utilizing a variety of effective teaching techniques.                | _____ | _____    |
| 18. Relating on-the-job training to classroom instruction.               | _____ | _____    |
| 19. Identifying job alternatives for students.                           | _____ | _____    |
| 20. Utilizing cooperative education programs.                            | _____ | _____    |
| 21. Sharing information through an effective communications system.      | _____ | _____    |
| 22. Having and using school support services: specialists, library, etc. | _____ | _____    |

The following Standard Deviation key can be used:

- 0 to .60 = Very High Level of Agreement
- .61 to 1.20 = High Level of Agreement
- 1.21 to 1.80 = Moderate Level of Agreement
- 1.81 & above = Low Level of Agreement



## APPENDIX E

Table

ADVISORY COMMITTEE OPINIONNAIRE  
(Form F)

64

Rating Key: 1=Strongly Disagree  
2=Disagree  
3=Undecided  
4=Agree  
5=Strongly Agree

SD Key: 0 to .60=Very High Level of Agreement  
.61 to 1.20=High Level of Agreement  
1.21 to 1.80=Moderate Level of Agreement  
1.80 & above=Low Level of Agreement

Were all advisory committee members surveyed? \_\_\_\_\_ Yes, \_\_\_\_\_ No.

If no, indicate sampling plan here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Advisory Committee members were asked to indicate their reaction to eleven statements concerning advisory input.

Response % = \_\_\_\_\_

| Statement                                                                                                                                                    | N= | Ratings |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|----|
|                                                                                                                                                              |    | Mean    | SD |
| 1. I feel that as a member of my Advisory Committee I have made a positive contribution to the effectiveness of the Capstone Program. . . . .                |    |         |    |
| 2. I believe my Advisory Committee has contributed in identifying the needs of the people that the Capstone Program must serve. . . . .                      |    |         |    |
| 3. I feel the advice given by my Advisory Committee has been considered/utilized by the people in the Capstone Program . . . . .                             |    |         |    |
| 4. My Advisory Committee has been involved in advising appropriate curriculum needs for the occupational area for which I serve . . . . .                    |    |         |    |
| 5. My Advisory Committee has been involved in evaluating the adequacy of in-school facilities and equipment . . . . .                                        |    |         |    |
| 6. My Advisory Committee meetings were scheduled for an adequate number of times to accomplish our purpose . . . . .                                         |    |         |    |
| 7. As far as I know, minutes of our Advisory Committee meetings are taken, compiled and disseminated. . . . .                                                |    |         |    |
| 8. I believe that the philosophy and objectives of the program for which I advise are carried through in the program. . . . .                                |    |         |    |
| 9. I feel my Advisory Committee is or has been involved in identifying specific occupational skills through task analysis or competency assessment . . . . . |    |         |    |
| 10. I feel the members of my Advisory Committee are equally representative of employers and employees. . . . .                                               |    |         |    |
| 11. I believe that the cooperative plan (on-the-job training) in the program for which I advise is well utilized . . . . .                                   |    |         |    |

12. Would you help us to identify the most appropriate time to hold an advisory committee meeting? [%]

(1) \_\_\_\_\_ Breakfast  
(2) \_\_\_\_\_ Lunch  
(3) \_\_\_\_\_ Dinner

(4) \_\_\_\_\_ Evening  
(5) \_\_\_\_\_ Other: \_\_\_\_\_

13. I am representative of: [%]  
(check one)

(1) \_\_\_\_\_ Employer  
(2) \_\_\_\_\_ Employee  
(3) \_\_\_\_\_ Self Employed  
(4) \_\_\_\_\_ Other: \_\_\_\_\_



Table  
ADVISORY COMMITTEE OPINIONNAIRE

Advisory committee members were asked  
to indicate their reactions to eleven  
statements concerning advisory input.

Response % = \_\_\_\_\_

Rating Key: 1=Strongly Disagree  
2=Disagree  
3=Undecided  
4=Agree  
5=Strongly Agree

SD Key: 0 to .60=Very High Level of Agreement  
.61 to 1.20=High Level of Agreement  
1.21 to 1.80=Moderate Level of Agreement  
1.81 & above=Low Level of Agreement

Were all advisory committee  
members surveyed? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, indicate sampling plan  
here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

| Item Statement                                                                                                                                                                                                                    |                                                                                                                                                           | M=Mean | SD=Standard Deviation | N= | Occupational Committees                                                                                                                                         |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|
| 1.                                                                                                                                                                                                                                | I feel that as a member of my Advisory Committee I have made a positive contribution to the effectiveness of the Capstone Program . . . . .               | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 2.                                                                                                                                                                                                                                | I believe my Advisory Committee has contributed in identifying the needs of the people the the Capstone Program must serve . . . . .                      | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 3.                                                                                                                                                                                                                                | I feel the advise given by my Advisory Committee has been considered/utilized by the people in the Capstone Program. . . . .                              | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 4.                                                                                                                                                                                                                                | My Advisory Committee has been involved in advising appropriate curriculum needs for the occupational area for which I serve. . . . .                     | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 5.                                                                                                                                                                                                                                | My Advisory Committee has been involved in evaluating the adequacy of in-school facilities and equipment . . . . .                                        | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 6.                                                                                                                                                                                                                                | My Advisory Committee meetings were scheduled for an adequate number of times to accomplish our purpose . . . . .                                         | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 7.                                                                                                                                                                                                                                | As far as I know, minutes of our Advisory Committee meetings are taken, compiled, and disseminated . . . . .                                              | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 8.                                                                                                                                                                                                                                | I believe that the philosophy and objectives of the program for which I advise are carried through in the program. . . . .                                | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 9.                                                                                                                                                                                                                                | I feel my Advisory Committee is or has been involved in identifying specific occupational skills through task analysis or competency assessment . . . . . | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 10.                                                                                                                                                                                                                               | I feel the members of my Advisory Committee are equally representative of employers and employees. . . . .                                                | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 11.                                                                                                                                                                                                                               | I believe that the cooperative plan in the program for which I advise is well utilized. . . . .                                                           | M      |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                   |                                                                                                                                                           | SD     |                       |    |                                                                                                                                                                 |  |  |  |  |  |  |  |  |  |
| 12. Would you help us to identify the most appropriate time to hold an advisory committee meeting? [%]<br>(1) <u>  </u> Breakfast (4) <u>  </u> Evening<br>(2) <u>  </u> Lunch (5) <u>  </u> Other: _____<br>(3) <u>  </u> Dinner |                                                                                                                                                           |        |                       |    | 13. I am representative of: [%]<br>(check one)<br>(1) <u>  </u> Employer<br>(2) <u>  </u> Employee<br>(3) <u>  </u> Self Employed<br>(4) <u>  </u> Other: _____ |  |  |  |  |  |  |  |  |  |

## Form H2 - SERVICES TO SPECIAL NEEDS (Disadvantaged and/or Handicapped) STUDENTS

Table \_\_\_\_

All vocational staff were asked to respond to each of the following items which concern services provided to disadvantaged and handicapped students in the vocational program.

Were all vocational staff surveyed? Yes \_\_\_\_ No \_\_\_\_ If no, indicate sampling plan here: \_\_\_\_ . Response percentage = \_\_\_\_

(Fill in)

Staff were asked: Based on your involvement with special needs students, how adequate would you rate your vocational program in the following areas?

Rating Key:

- 5 = More than Adequate
- 4 = Adequate with Some Strong Areas
- 3 = Adequate
- 2 = Improving but Still Inadequate
- 1 = Inadequate
- 0 = No Involvement

SD Key:

- 0 to .60 = Very High Level of Agreement
- .61 to 1.20 = High Level of Agreement
- 1.21 to 1.80 = Moderate Level of Agreement
- 1.81 and above = Low Level of Agreement

| Statement                                                                                                                                                                                                                            | N = _____ | Ratings |       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|-------|
|                                                                                                                                                                                                                                      |           | Mean    | SD    |
| <u>Placement and Programming</u><br><u>of Handicapped* Students in Vocational Classes</u>                                                                                                                                            |           |         |       |
| 1. My involvement in the decision which results in a handicapped student's enrollment in my class . . . . .                                                                                                                          |           | _____   | _____ |
| 2. The quantity and quality of information, regarding the vocational interests and aptitudes of handicapped students, available to assist me in making vocational class placement and individualized programming decisions . . . . . |           | _____   | _____ |
| 3. My involvement in assisting a special education teacher to develop an individualized educational program (IEP) for each handicapped student enrolled in my class(es) . . . . .                                                    |           | _____   | _____ |
| 4. The level of direct assistance I have received from special education teachers when handicapped students are placed in my class(es) . . . . .                                                                                     |           | _____   | _____ |
| 5. My understanding of the role and responsibility of the special education teachers who serve the students that are enrolled in my class(es) . . . . .                                                                              |           | _____   | _____ |
| <u>Meeting the Needs</u><br><u>of Handicapped* and Disadvantaged* Students</u>                                                                                                                                                       |           |         |       |
| 6. Coordination of what I teach with the classes and/or services the student receives prior to and after leaving my program. . . . .                                                                                                 |           | _____   | _____ |

## Form H2 - SERVICES TO SPECIAL NEEDS (Disadvantaged and/or Handicapped) STUDENTS (continued)

| Statement                                                                                                                             | Ratings |       |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|-------|
|                                                                                                                                       | Mean    | SD    |
| 7. Process of monitoring student progress in vocational classes . . . . .                                                             | _____   | _____ |
| <u>Job Placement of the Disadvantaged* or Handicapped* Student</u>                                                                    |         |       |
| 8. Your knowledge of community jobs currently available to special needs students. . . . .                                            | _____   | _____ |
| 9. Your involvement in cultivating and maintaining close working relationships with employees and potential employers. . . . .        | _____   | _____ |
| 10. Your involvement in helping employers overcome fear of risk in hiring a special needs person (job development activity) . . . . . | _____   | _____ |
| 11. Time you spend searching for jobs to match the student's abilities and training . . . . .                                         | _____   | _____ |
| 12. Your knowledge of results of job followups for special needs students as compared to other vocational program completers. . . . . | _____   | _____ |
| <u>Program Management</u>                                                                                                             |         |       |
| 13. In-service training you have received to prepare you to serve special needs students. . . . .                                     | _____   | _____ |
| 14. Evaluation you have received on how effectively you serve special needs students . . . . .                                        | _____   | _____ |
| 15. Does the program evaluation plan include special needs students? . . . . .                                                        | _____   | _____ |
| 16. Extent to which your program advisory committee is used to the advantage of students with special needs. . . . .                  | _____   | _____ |
| 17. Extent to which you involve parents in identifying and helping with student's problems. . . . .                                   | _____   | _____ |
| 18. Extent to which you use available public and private resources to assist students in the vocational program . . . . .             | _____   | _____ |

\* See Definition of terms, p. 68

H2

## Form H2 - SERVICES TO SPECIAL NEEDS (Disadvantaged and/or Handicapped) STUDENTS (concluded)

Definition of TermsSpecial Needs Students:

The term "special needs students" is a generic term used to include disadvantaged, handicapped, and those students with limited English speaking ability (LESA).

Disadvantaged Students:

"Disadvantaged" means persons (other than handicapped persons) who have academic or economic disadvantages and require special services, assistance or programs in order to enable them to succeed in vocational education programs. The term includes persons whose needs result from: lack of reading and writing skills; lack of mathematical skills; below grade level performances; poverty, parental unemployment; parental public assistance; or student is institutionalized or under state guardianship.

Handicapped Students:

"Handicapped" means persons, who by reason of their handicapping condition, require special education and related services and who cannot succeed in the regular vocational program without special educational assistance or a modified vocational education program. The term includes persons who are mentally retarded; hard of hearing; deaf; speech impaired; visually handicapped; seriously emotionally disturbed; other health impaired; deaf-blind; specific learning disabled; orthopedically impaired; and multi-handicapped.

Limited English Speaking Ability (LESA):

LESA refers to any member of a national origin minority who does not speak and understand the English language in an instructional setting well enough to benefit from normal studies to the same extent as a student whose primary language is English. Some examples of national origin minorities are persons of Spanish, Chinese, or Italian heritage.

Individual Education Program (IEP):

An IEP is a written statement describing the education objective for and the services to be provided to each handicapped child.

NUMBER AND PERCENT OF QUESTIONNAIRES  
RETURNED BY GRADUATES

Table \_\_\_\_\_

| GRADUATES                     | TOTAL<br>GRADUATES | TOTAL<br>SURVEYS<br>MAILED | TOTAL RE-<br>TURNED NON-<br>DELIVERABLE | TOTAL<br>RETURNED<br>COMPLETED* | PERCENTAGE<br>RETURNED** |
|-------------------------------|--------------------|----------------------------|-----------------------------------------|---------------------------------|--------------------------|
| Capstone/19__                 |                    |                            |                                         |                                 |                          |
| Sequence Voca-<br>tional/19__ |                    |                            |                                         |                                 |                          |
| General Aca-<br>demic/19__    |                    |                            |                                         |                                 |                          |
| TOTAL                         |                    |                            |                                         |                                 |                          |

\*Figure includes those completed returns that were received too late to process.

\*\*Percentage is calculated on the number of questionnaires mailed minus those returned non-deliverable.

NUMBER AND PERCENT OF QUESTIONNAIRES  
RETURNED BY EMPLOYERS

Table \_\_\_\_\_

| Graduates              | Total<br>Graduates | Total Em-<br>ployer Sur-<br>veys Mailed | Total Re-<br>turned Non-<br>Deliverable | Total<br>Returned<br>Completed* | Percentage<br>Returned** |
|------------------------|--------------------|-----------------------------------------|-----------------------------------------|---------------------------------|--------------------------|
| Capstone - Related     |                    |                                         |                                         |                                 |                          |
| Capstone - Non-Related |                    |                                         |                                         |                                 |                          |
| Sequence Vocational    |                    |                                         |                                         |                                 |                          |
| General Academic       |                    |                                         |                                         |                                 |                          |

TOTAL

\* Figure includes those completed returned that were received too late to process.

\*\*Percentage is calculated on the number of questionnaires mailed minus those returned non-deliverable.

EMPLOYMENT STATUS OF ONE-YEAR GRADUATES

Table \_\_\_\_\_

| Graduates               | N | Employment Status |                                     |            |  | Available<br>for<br>Employment |  |
|-------------------------|---|-------------------|-------------------------------------|------------|--|--------------------------------|--|
|                         |   | Employed          | Full-time<br>Military<br>Employment | Unemployed |  |                                |  |
|                         |   | N %               | N %                                 | N %        |  | N %                            |  |
| Capstone-19____         |   |                   |                                     |            |  |                                |  |
| Non-Capstone-<br>19____ |   |                   |                                     |            |  |                                |  |

## EDUCATIONAL STATUS OF ONE-YEAR GRADUATES

Table \_\_\_\_

| Graduates       | N | Educational Status             |   |                            |   |                             |   |                           |   |                             |   |                                 |   |
|-----------------|---|--------------------------------|---|----------------------------|---|-----------------------------|---|---------------------------|---|-----------------------------|---|---------------------------------|---|
|                 |   | Not currently Attending School |   | Currently Attending School |   | Vocational Technical School |   | 4-Year College/University |   | Related Educational Program |   | Not related Educational Program |   |
|                 |   | N                              | % | N                          | % | N                           | % | N                         | % | N                           | % | N                               | % |
| Capstone-19     |   |                                |   |                            |   |                             |   |                           |   |                             |   |                                 |   |
| Non-Capstone-19 |   |                                |   |                            |   |                             |   |                           |   |                             |   |                                 |   |

## EMPLOYMENT AND EDUCATIONAL STATUS OF THREE-YEAR GRADUATES

Table \_\_\_\_

| Graduates                  | N | Employment/Education Status |   |           |   |           |   |            |   | In School<br>N |
|----------------------------|---|-----------------------------|---|-----------|---|-----------|---|------------|---|----------------|
|                            |   | FULL Time                   |   | PART Time |   | Homemaker |   | Unemployed |   |                |
|                            |   | N                           | % | N         | % | N         | % | N          | % |                |
| Capstone Vocational-19____ |   |                             |   |           |   |           |   |            |   |                |
| Sequence Vocational-19____ |   |                             |   |           |   |           |   |            |   |                |
| General Academic-19____    |   |                             |   |           |   |           |   |            |   |                |

RELATEDNESS OF VOCATIONAL TRAINING  
TO PRESENT JOB FOR EMPLOYED ONE-YEAR GRADUATES

Table \_\_\_\_\_

| Graduates         | N | Total Employed | Relatedness of Job to Training |   |          |   |             |   |
|-------------------|---|----------------|--------------------------------|---|----------|---|-------------|---|
|                   |   |                | Directly                       |   | Somewhat |   | Not Related |   |
|                   |   |                | N                              | % | N        | % | N           | % |
| Capstone-19__     |   |                |                                |   |          |   |             |   |
| Non-Capstone-19__ |   |                |                                |   |          |   |             |   |
| TOTAL             |   |                |                                |   |          |   |             |   |

(HOURLY WAGE GROUPING (before deductions)  
FOR CAPSTONE AND NON-CAPSTONE GRADUATES

Table \_\_\_\_\_

| Hourly Wage Grouping<br>(Full time & Part time) | N=<br>Capstone<br>19__<br>N | N=<br>Sequence Voc-<br>ational-19__<br>N | N=<br>General Aca-<br>demic-19__<br>N |
|-------------------------------------------------|-----------------------------|------------------------------------------|---------------------------------------|
| 1. Under \$2.00                                 |                             |                                          |                                       |
| 2. \$2.00 to \$2.99                             |                             |                                          |                                       |
| 3. \$3.00 to \$3.99                             |                             |                                          |                                       |
| 4. \$4.00 to \$4.99                             |                             |                                          |                                       |
| 5. \$5.00 to \$5.99                             |                             |                                          |                                       |
| 6. \$6.00 to \$6.99                             |                             |                                          |                                       |
| 7. \$7.00 to \$7.99                             |                             |                                          |                                       |
| 8. \$8.00 to \$8.99                             |                             |                                          |                                       |
| 9. Over \$9.00                                  |                             |                                          |                                       |

EMPLOYER PREFERENCE FOR HIRING  
VOCATIONALLY TRAINED GRADUATES

Table \_\_\_\_\_

| Degree of Preference         | Employers of Graduates |                          |                              |                             |                          |
|------------------------------|------------------------|--------------------------|------------------------------|-----------------------------|--------------------------|
|                              | Total<br>N      %      | Capstone<br>Related<br>% | Capstone<br>Non-Related<br>% | Sequence<br>Vocational<br>% | General<br>Academic<br>% |
| 1. No preference             |                        |                          |                              |                             |                          |
| 2. Some preference           |                        |                          |                              |                             |                          |
| 3. A good deal of preference |                        |                          |                              |                             |                          |

EMPLOYERS RATINGS OF VOCATIONAL TRAINING OF HIGH SCHOOL  
VOCATIONAL GRADUATES COMPARED TO NON-VOCATIONAL  
GRADUATES

Table \_\_\_\_\_

| Rating Descriptor                 | Employers of Graduates |                          |                              |                             |                          |
|-----------------------------------|------------------------|--------------------------|------------------------------|-----------------------------|--------------------------|
|                                   | Total<br>N      %      | Capstone<br>Related<br>% | Capstone<br>Non-Related<br>% | Sequence<br>Vocational<br>% | General<br>Academic<br>% |
| (0) No basis for comparison       |                        |                          |                              |                             |                          |
| (1) Individual is less prepared   |                        |                          |                              |                             |                          |
| (3) Both are about the same       |                        |                          |                              |                             |                          |
| (5) Individual is better prepared |                        |                          |                              |                             |                          |

EMPLOYERS MEAN RATINGS OF JOB PREPARATION LEVEL  
OF CAPSTONE GRADUATES FOR PRESENT JOB

Table \_\_\_\_\_

| Selected Aspects of Employment                                                                | Employers of Graduates |    |                  |    |                      |    |
|-----------------------------------------------------------------------------------------------|------------------------|----|------------------|----|----------------------|----|
|                                                                                               | Total                  |    | Capstone Related |    | Capstone Non-Related |    |
|                                                                                               | Mn                     | SD | Mn               | SD | Mn                   | SD |
| 1. Use of tools and equipment.                                                                |                        |    |                  |    |                      |    |
| 2. Selection and care of space, materials and supplies.                                       |                        |    |                  |    |                      |    |
| 3. Quantity of work, output of satisfactory amount.                                           |                        |    |                  |    |                      |    |
| 4. Ability to work with co-workers.                                                           |                        |    |                  |    |                      |    |
| 5. Accepting advise and supervision.                                                          |                        |    |                  |    |                      |    |
| 6. Working in a leadership role.                                                              |                        |    |                  |    |                      |    |
| 7. Understanding the value and importance of work.                                            |                        |    |                  |    |                      |    |
| 8. Understanding, in general, U.S. economic system (supply-demand, inflation, recession, etc. |                        |    |                  |    |                      |    |

| <u>Rating Scale</u> | K   | Well     | Adequately | Not at all |   |   |
|---------------------|-----|----------|------------|------------|---|---|
|                     | E = | Prepared | Prepared   | Prepared   |   |   |
| Y                   |     | 5        | 4          | 3          | 2 | 1 |

Standard Deviation K    0 to .60 = Very High Level of Agreement  
                                  E .61 to 1.20 = High Level of Agreement  
                                  Y 1.21 to 1.80 = Moderate Level of Agreement  
                                  1.80 & above = Low Level of Agreement

STUDENTS RESPONSE TO PREVIOUSLY FILLING OUT  
AN OCCUPATIONAL INTEREST SURVEY

Table \_\_\_\_\_

| Item: I have previously filled out<br>a questionnaire or survey<br>about my occupational interests. | Student Response |   |   |   |    |   |
|-----------------------------------------------------------------------------------------------------|------------------|---|---|---|----|---|
|                                                                                                     | Yes              |   | ? |   | No |   |
|                                                                                                     | N                | % | N | % | N  | % |
| 1. Male                                                                                             |                  |   |   |   |    |   |
| 2. Female                                                                                           |                  |   |   |   |    |   |
| TOTAL                                                                                               |                  |   |   |   |    |   |

STUDENTS RESPONSE TO NUMBER OF MEETINGS  
WITH A COUNSELOR LAST YEAR

Table \_\_\_\_\_

| Item: Last year I met<br>with a counselor. | Total |   | Student Response |   |        |   |
|--------------------------------------------|-------|---|------------------|---|--------|---|
|                                            | N     | % | Male             |   | Female |   |
|                                            | N     | % | N                | % | N      | % |
| 1. More than 5 times                       |       |   |                  |   |        |   |
| 2. 4 or 5 times                            |       |   |                  |   |        |   |
| 3. 2 or 3 times                            |       |   |                  |   |        |   |
| 4. Once                                    |       |   |                  |   |        |   |
| 5. Never                                   |       |   |                  |   |        |   |

STUDENTS RESPONSE TO THE DEGREE OF SATISFACTION  
WITH THEIR PRESENT VOCATIONAL TRAINING

Table \_\_\_\_\_

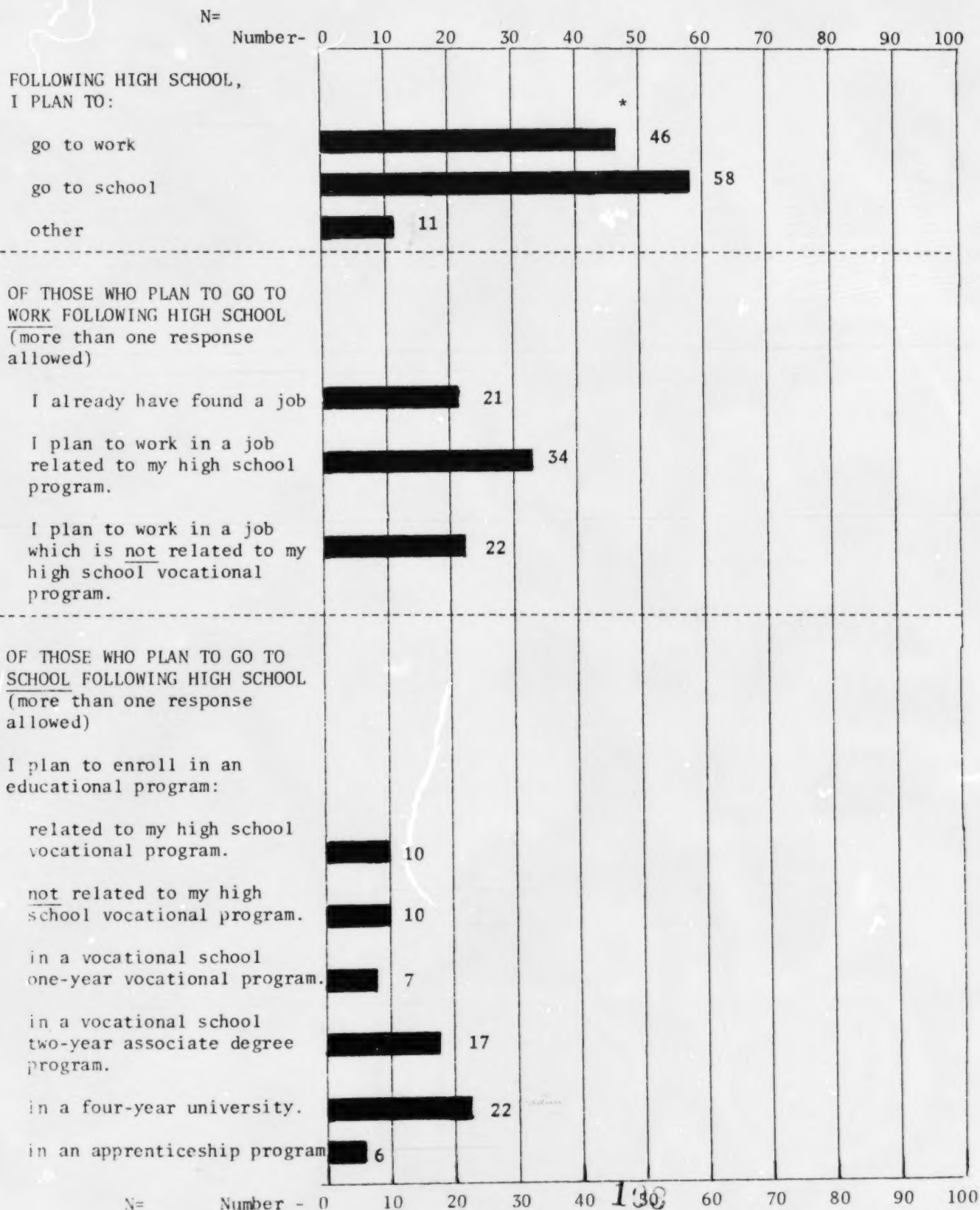
| Item: training I am receiving at present: | Student Response by Vocational Program |   |          |   |          |   |        |   |          |   |          |   |
|-------------------------------------------|----------------------------------------|---|----------|---|----------|---|--------|---|----------|---|----------|---|
|                                           | Agri.                                  |   | Bus. Ed. |   | Dis. Ed. |   | Health |   | Home Ec. |   | Ind. Ed. |   |
|                                           | N                                      | % | N        | % | N        | % | N      | % | N        | % | N        | % |
| 1. I am very unsatisfied.                 |                                        |   |          |   |          |   |        |   |          |   |          |   |
| 2. I am unsatisfied.                      |                                        |   |          |   |          |   |        |   |          |   |          |   |
| 3. I am satisfied.                        |                                        |   |          |   |          |   |        |   |          |   |          |   |
| 4. I am very satisfied.                   |                                        |   |          |   |          |   |        |   |          |   |          |   |

STUDENTS IMMEDIATE POST-HIGH SCHOOL PLANS

Table \_\_\_\_\_

| Item: Following High school, I plan to: | Student Response by Vocational Program |   |          |   |          |   |        |   |          |   |          |   |
|-----------------------------------------|----------------------------------------|---|----------|---|----------|---|--------|---|----------|---|----------|---|
|                                         | Agri.                                  |   | Bus. Ed. |   | Dis. Ed. |   | Health |   | Home Ec. |   | Ind. Ed. |   |
|                                         | N                                      | % | N        | % | N        | % | N      | % | N        | % | N        | % |
| 1. go to work                           |                                        |   |          |   |          |   |        |   |          |   |          |   |
| 2. go on to school                      |                                        |   |          |   |          |   |        |   |          |   |          |   |
| 3. other                                |                                        |   |          |   |          |   |        |   |          |   |          |   |

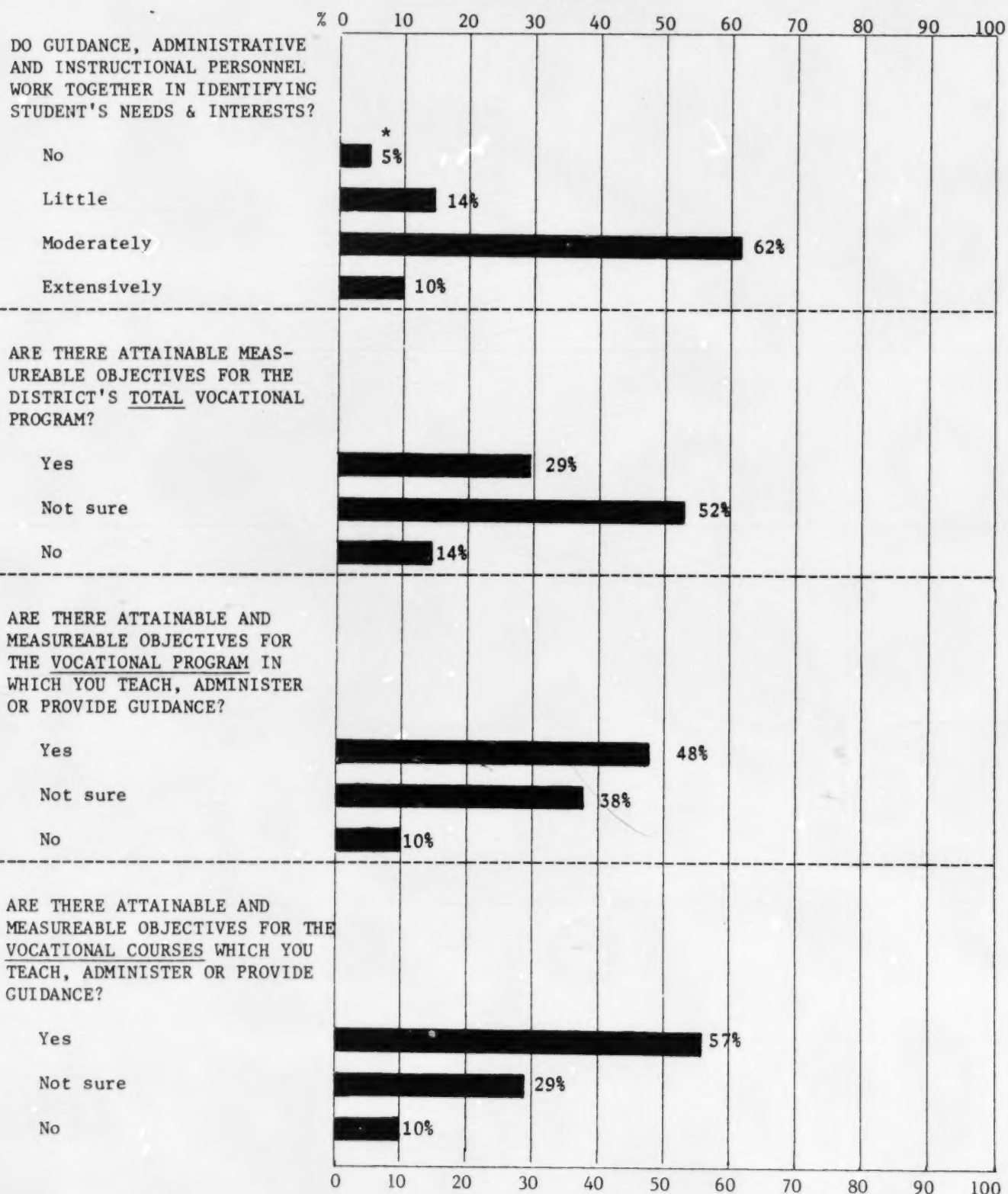
Figure \_\_\_\_\_



\*Bars are for example only.

## Professional Staff Response to the Following Related Items

Figure \_\_\_\_\_



\*Bars are for example only

## APPENDIX H: SAMPLE LETTERS

## Coordinator's Correspondence to Team Members (Letter #1)

(Letterhead)

Date (three to four weeks in advance of the visitation)

Name  
and  
Address

Dear \_\_\_\_\_:

Thank you for agreeing to participate in the team visit to \_\_\_\_\_  
High School for the purpose of assisting in the evaluation of the Vocational  
Program. It will be a pleasure to work with you on this assignment.

Attached you will find (1) a full team roster, (2) an information sheet for your  
reference, and (3) a personal data sheet which can be filled out and returned to  
me.

In the near future you will receive (1) a copy of the Self Evaluation Report and  
(2) the tentative team schedule. May I suggest that you study these materials  
as well as the Team Guidelines sent to you by UW-Stout prior to the visit.

If you have any questions concerning the visit, please contact me by letter or  
telephone \_\_\_\_\_.

Sincerely yours,

Attachments (3)

## APPENDIX H: SAMPLE LETTERS (concluded)

## Coordinator's Correspondence to Team Members (Letter #2)

## (Letterhead)

Date (at least ten days in advance of the visitation)

Name  
and  
Address

Dear \_\_\_\_\_:

Enclosed you will find the tentative visitation schedule and the Self Evaluation Study compiled by Vocational Program Personnel at \_\_\_\_\_ High School. This report represents the completion of the first phase of the evaluation.

As you study the report, there are a number of considerations to bear in mind.

- (1) Note that this is a self evaluation rather than the traditional form self study. Instrumentation was designed based upon state-wide goals and objectives allowing Program personnel, community members and graduates the opportunity to participate in the evaluation.
- (2) Note also that the Program as a whole is evaluated. Individual occupational areas within the Program are not singled out in the self evaluation but rather are earmarked for scrutiny in the team visitation. However, a descriptive narrative of each occupational area is included in the Program Profile, Chapter II.
- (3) The first two chapters of the Self Evaluation Study will give you a profile of the District and Program. The next two chapters contain summaries of the data. Chapter five contains conclusions about our vocational program drawn by staff from the data.

I am looking forward to working with you on this assignment. If you have any questions concerning the visitation, please contact me by letter or telephone \_\_\_\_\_.

Have a good day!

Sincerely yours,

Attachments (2)

APPENDIX I  
INFORMATION FOR VISITING TEAM

(This information will be obtained well in advance of the visitation and will be sent to the team members and consultants.)

1. Name of school: \_\_\_\_\_
2. Team Leader: \_\_\_\_\_
3. Dates of visit: \_\_\_\_\_
4. Housing: (name facility, location, and telephone number) \_\_\_\_\_  
\_\_\_\_\_
5. First meeting of team: time: \_\_\_\_\_  
place: \_\_\_\_\_
6. Final meeting of team: (estimated time) \_\_\_\_\_
7. Arrangements:
  - a. Where on campus will the team work room be located? \_\_\_\_\_  
\_\_\_\_\_
  - b. Will other work or conference rooms be available? Where? \_\_\_\_\_  
\_\_\_\_\_
  - c. Will dictating equipment be available? \_\_\_\_\_
  - d. Will typewriters and/or duplicating capabilities be available? \_\_\_\_\_  
\_\_\_\_\_
  - e. Will transportation be available to reach facilities located away from  
the main campus? \_\_\_\_\_
8. Message center where members can be contacted: \_\_\_\_\_  
\_\_\_\_\_

## PERSONAL DATA SHEET

Please fill out the items listed below and return by (date) to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Self addressed, stamped envelope is enclosed)

(Check one)

1. Name \_\_\_\_\_ ☐ Female; ☐ Male
2. Arrival time (estimate) \_\_\_\_\_
3. Method of travel \_\_\_\_\_
4. Team members traveling together (names) \_\_\_\_\_  
\_\_\_\_\_
5. Special dietary requirements \_\_\_\_\_
6. Arrangements have been made for members to share double rooms. If you prefer a single (twin) room only, please specify here:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Indicate rooming preference:
- Non-Smoker ☐
- Smoker ☐

Note: The number of team members selected must be flexible for the size of the school, the size of the vocational department, and the number of discipline areas operating within the department. Team members can, in some cases when appropriate and qualified, carry more than one criteria or one critieria and one discipline area.

## APPENDIX I

### TEAM ASSIGNMENTS

RESPONSIBILITY (Names)

- Needs Assessment
- Goals/Planning
- Implementation
- Product
- Evaluation

## SPECIAL NEEDS

## DISCIPLINE AREAS

- Agriculture
- Business and Office
- Distributive Education
- Health Occupations
- Home Economics Education
- Industrial Education

- CONSULTANTS (if any)

Sample Visitation Schedule

Pre-Visitation  
Evening

- Arrive at school by 7:00 p.m. Please check in at (specify lodging facilities) and have dinner before arrival at school.
  - 7:00 - 9:30 p.m. Orientation session by Team Leader for visiting team at school team work room. (specify room site)
- 

First Day

- Arrive at school by 8:00 a.m. Please have breakfast before arrival.
  - 8:30 a.m.\* Local Staff-Team Introduction meeting. Meet superintendent, principal, LVEC, available vocational staff.
  - 9:00 a.m. Team work/assignments/interviews.
  - 12:00 noon\* Lunch at (specify facility)
  - 1:00 - 1:30 p.m. Team leader available in team work room for assistance.
  - 1:00 p.m. Team work/assignments/interviews.
  - 4:30 p.m. Team conference in school team work room. LVEC will be present to clarify any problems. Team members will begin writing tentative conclusions.
  - 6:00 p.m. Dinner at (specify facility)
  - 7:00 p.m. Team consensus meeting in team or motel work room. Begin discussing tentative conclusions only. Recommendations and suggested solutions for each criteria will be formulated following consensus.
  - 10:00 p.m. Dismiss for the day.
- 

Second Day

- 8:00 a.m. Team leader available in team work room for assistance.
- 8:30 a.m. Team work/assignments/interviews (scheduled by evaluator) or begin writing reports.
- 10:30 a.m. Team conference in team work room. Report writing.
- 12:00 noon\* Lunch

\*adjust time to fit school schedule.

(continued)

## APPENDIX I

## Sample Visitation Schedule (concluded)

- 1:00 p.m. Report writing. Report readings. Team work room.
  - 3:00 p.m. Debriefing: Team work room, Self Evaluation  
(approximate) Report, team reports, and interview sheets due to team leader. Travel vouchers filled out and turned in. Team dismissed. Leave school.
  - 3:30 p.m. Report session of Team Leader with  
(approximate) Administration.
-

Area of Concern \_\_\_\_\_

| CONCLUSIONS (findings) | RECOMMENDATIONS | SUGGESTED SOLUTIONS |
|------------------------|-----------------|---------------------|
| 112                    |                 | 113                 |



## 88

Time

Place

(day)

8:30 - 9:00

Staff/Team Introductory Meeting

4:30

Team Conference with LVEC - Write tentative conclusions

7:00

### Team Consensus Meeting

(day)